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The Care, Feeding and Homoeopathic Treatment of Children

by

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To

K. F. B.

the ideal mother

in grateful recognition of her marvelous intuitive knowledge of everything pertaining to the welfare of childhood and her untiring devotion in its application

this little book is dedicated by

The Author

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Preface

This little book is intended to render real service to young mothers in supplying common-sense information on a most vitally important subject. In view of the fact that some three hundred thousand babies died in the United States last year before they reached their second birthday, largely on account of lack of knowledge of proper feeding and hygienic care, together with the indiscriminate use of hurtful drugs, especially modern coal tar products, it seems to me that any effort to spread rational knowledge on the essentials of care and feeding of young children, together with calling attention to the blessings of a scientific medicinal treatment as practiced by the homœopathic school of medicine, is to be welcomed.

The directions contained in this book are the results of the author's experience in treating children for the past thirty years, and while theories come and go, the practical things advocated here have stood the test of time and can be relied upon.

WILLIAM BOERICKE, M. D.

SAN FRANCISCO, CAL., March, 1911.

THE FIRST MONTH OF INFANCY.

No creature is so helpless at birth as the human infant. In order that it may survive at all, it needs all the protection and care that the parents can give it. The principles underlying this protection and care are so few and simple that they are within the reach of all, and if carried out would banish much suffering and discomfort and frequent doctors' visits from the lot of the little ones. They are embraced in cleanliness, warmth, suitable nourishment and rest. Keep your baby warm, clean, and dry; give it plenty of pure air, just sufficient suitable food, and secure for him plenty of rest, and you fulfill the ideal conditions for its health and happiness; and its ready, responsive growth, in such a genial and well-adapted environment, will delight you from day to day.

Now simple as these conditions are, it is astonishing how comparatively few babies are permitted to enjoy the comfort their application gives, simply because it is a comparatively rare thing to see these principles applied in the daily routine of a baby's life intelligently and really thoughtfully. Many of baby's discomforts originate from the neglect of these first principles, and the prevention of much illness lies in their rigid adoption; not, when it is too late to ostracize the enemy you yourself have called up by drugging and dosing.

As the child enters the world, at once an ocean of tactile impressions surrounds it. Something touches its sensitive skin; let it be something soft, warm, pleasant, tender; nothing hard, rough, harsh or cold. See that the room is warm, pleasant and shaded, so that no cold or chilly atmosphere may excite the cutaneous nerves and no glare of light irritate his eyes. The temperature of the room should be 76° F. for the first week. Even our best care will not prevent an outburst of loud protest with which he greets his new environment; we welcome his lusty cry of self-assertion with which he establishes the function of his lungs. This is brought about by the sudden contact with the outer air, which is a shock to the new-born infant. Therefore the first thing the new-born babe does is to scream in a burst of displeasure at the unwelcome change. It is the first sign that there is a human soul within endowed with human freedom, for no animal cries when born, not even the monkey, neither mother nor child. The shock of the outside air should start respiration; the babe ought to gasp as soon as born, to start free inspiration. By that act alone he becomes a citizen of this world and can begin his career for eternal life. Should the babe not cry, ascertain at once whether it is breathing. It may be necessary to clear the mouth of mucus, sprinkling cold water over it or slapping the back, before respiration be fully established. Should these measures fail, others must be tried persistently so long as the heart beats. Alternate applications

of hot and cold water—five seconds in cold water, just for the shock; one minute in hot 110° F. Artificial respiration, by laying child on back and regularly sweeping its arms over head and down to sides, about thirty times a minute. These measures will usually be sufficient for all ordinary cases. Warmth is most essential to re-establish vitality, and in your efforts at resuscitation do not forget to look out for this. The three grand principles governing the treatment of asphyxia neonatorum, as this condition is called, when they do not breathe at birth is:

(1) Maintain the body heat.

(2) Free air-passages from obstruction.

(3) Stimulate respiration.

The importance of keeping baby warm is not generally appreciated. The infant is wet, exposure is often prolonged, evaporation is rapid, the body temperature sinks rapidly. At the same time air-passages must be cleared. Wipe the throat with the little finger covered with the corner of a soft napkin while the child is held up by the ankles. This excites cough, and the mucus is expelled.

Watch asphyxiated children and such as were delivered by severe operative procedures; they should be watched for first hours and days; their lungs sometimes fill up and cause secondary asphyxia, else you may find such a one dead in the crib.

If the baby cries vigorously, there is no need of hurry to tie the cord; indeed, it is advisable to wait until the pulsations cease. But *in case the baby is purple or gasping,* cut the cord and allow a few teaspoonfuls of blood to escape. In tying use two ligatures, the nearest about two inches from the child. Before leaving the baby in its blanket, see that the cord is not bleeding.

First Services. One of the most important is to wipe the eyelids and eyebrows clean, which includes the little fists at the same time, as they will be rubbing the eyes. While the baby is lying in its warm corner waiting for its first cleansing, the nurse ought occasionally to listen for the baby's breathing inside the blanket. A smothered cry now and then is reassuring.

The first care is to have *it warm.* Within its blanket it needs but little air; enough filters through the blanket. Do not begin its first bath before you have selected a snug, warm corner, free from draughts and strong light. Have everything ready before you begin. When once begun, it must be done speedily. Unless the baby is strong and normal, better dispense with the bath. Warm sweet oil inunction and cotton batting are then more necessary to preserve its feeble life.

The First Bath. Have everything ready. Be sure about this. Have everything within easy reach. See that you have olive oil, white castile soap, powder-box, bath towel or soft blanket for lap, and

a thermometer to test the temperature of the water, which should be 96° to 100° F. *Do not trust your hand.* Remember that the recent home of the little newcomer was very warm, the temperature being between 98° and 99°.

The first bath should be given to all infants soon after birth, except in those cases where extreme weakness makes it inadvisable. Here simply anointing with olive oil will answer every purpose until the child grows stronger; and in every case prepare for the first bath by rubbing every part of the body, especially the scalp and between the thighs and under arm-pits, with warm sweet oil, for the purpose of dissolving and detaching the coagulum, the "cheesy mass," which more or less envelops the newly born. Besides, the oil is soothing and comforting to the sensitive, tender surface. Having anointed the baby all over, with a soft sponge or very soft flannel cloth and warm water and a little white castile soap wash every part, and then finish with a quick plunge in the little tub, after which envelop him in the warm, large, soft flannel apron, for thorough drying. Before this is done *the eyes should be cleansed* with a piece of soft linen or absorbent cotton and luke-warm water, preferably adding a small teaspoonful of salt to about one pint of water, but if pus appears in the eyes, notify the physician. Meanwhile make a solution of boracic acid, using about ten grains to one ounce of warm water, and wash with absorbent cotton every hour.

When dried, powder with cornstarch or talcum. Everything about the first bath must be done speedily. Let the exposure be as slight and as short as possible. Before going on to dressing, see that the hands and feet are not blue and cold. In order to do everything expeditiously as possible, every needful article must be within reach and collected together beforehand. Be sure about this, as nothing is so trying to everybody, especially the little victim, as looking for some necessary thing with the naked and wet baby in your lap.

The bath may be given to every healthy infant every morning. For very restless babies, an evening bath may insure a good night.

A perfectly clean, new, soft sponge or a wash-rag made of flannel or of diaper cloth should be used for applying soap. All the folds and creases must be soaped, but do not force anything into the ears or allow water to remain there. Under no circumstances listen to any directions for cleansing the little genitals more than the outer surface. It is a fad at present for the extreme, up-to-date physician to give minute directions in this particular. It is uncalled for as a routine measure. (See Phimosis.) Take special care to dry those parts of the body where the natural folds of the body form crevices in which moisture may be retained. This may produce chafing and excoriations. If this is done carefully, the powder is practically useless.

Gently rubbing the body and especially the back with the palm of the hand is advisable after the

bath and must be grateful to the babe, and is often sufficient to quiet restless and nervous attacks.

Soap. The too liberal use of soap for infants is open to objections, and its use must be watched. The alkali in the soap is the objectionable thing. Often from its use the skin, which should be like velvet, becomes harsh and dry. Warm, soft water is usually sufficient to remove the dirt without the natural dressing—the oily sebaceous nourishment to the skin from within, which renders it soft and pliable. This the lye of the soap dissolves, leaving the skin dry and hard.

The Cord. The next thing in order is the *dressing of the cord.* This is a remnant of its pre-natal existence, and nature gets rid of it by a *drying process.* The true care of the cord, therefore, consists in aiding nature in its method of separation, not by the usual method of excluding evaporation and besmearing it with salves, etc., but simply keeping it like every other part of the baby's body, *dry and clean.* How? Simply washing it, drying and wrapping it in absorbent cotton or sterilized gauze. In a few days it will come off, and now a little calendula cerate applied to the navel will prevent any further trouble here. While the cord is still attached it should be laid to the left, underneath the belly-band. This is to be pinned (on the side) with safety pins, which should lie crosswise of the body.

Belly-Band. In regard to the belly-band, you need it, of course, until the navel is healed, after which time it becomes questionable whether it is performing any use. While not really essential now, I cannot consider it a "hoary nuisance," and really do not think it prudent to leave it off for six months, simply because it protects the abdominal region from cold and exposure, and tendency to diarrhœa. But it must not be so tight as to impede respiration, or interfere with the various dimensions of the abdomen from feeding. Knitted woolen bands are the best; these accommodate themselves to the size of the body. A lapel knitted on the lower edge may be pinned to the napkin to prevent the slipping up.

The napkins should be the softest material and of good size. For very young infants, cotton diapers are softer than linen and absorb better. The baby must not be left any longer than can possibly be helped in soiled or wet diapers. The napkins need your constant attention. Replace them at once with clean and dry ones; and when changed the parts soiled should first be wiped clean with a soft cloth moistened in warm water, and then thoroughly dried by gentle pressure with a soft, dry, warm towel, and lastly dusted with baby powder consisting simply of cornstarch or talcum. Cornstarch alone, or mixed with a little powdered orris-root, makes the best baby powder, much more preferable than the perfumed packages of druggists', which frequently contain sulphate of lime or

even more violent poisons. *Calend-talc* is probably the best of all these preparations. Never be guilty of the abomination of drying napkins in the nursery, or, indeed, anywhere, before they are washed, for remember that *the napkins should always be washed and rinsed,* using but little soap, and dried well before being used again, and always boiled thoroughly, once, or, better, twice a week. Few mothers realize the necessity of *washing* a diaper after being used by the baby, and hence the need of dwelling on this point. Almost every case of chafing, soreness between thighs, "red gum," etc., is due to neglect here. Absolute cleanliness and dryness, rather than medicines, are the indications for treatment.

Diapering the Baby. The following advice from "Babyhood" is too valuable to be omitted here:

"There are ways and ways of diapering a baby, and experience only will teach how to do it at once quickly, neatly, and in such a manner that the article will not be found binding the little feet together instead of in its proper place. The napkin should be fairly snug around the waist—snug enough to hold it in place without binding the child's abdomen—and should be pinned to the shirt or band when one is worn. A square of strong white cotton sewed on the shirt or band just where it meets the diaper will prevent the shield-pins from tearing the woolen fabric. Tuck the corners of the diaper well in, folding the right-hand one

under the left leg and the left-hand one under the right leg, but be careful in doing this not to draw the ends too tight. Serious trouble with boy babies has arisen from too great constriction over the delicate little parts. Having fastened the long stockings up in such a way as to fit the napkin about the legs like a pair of drawers, baby's toilet in this particular is complete.

"But, artistic as your work may be, do not hesitate to undo it the moment the cloth is discovered to be wet. This is the point which I wish especially to make, and which is so often overlooked. A child will take cold when not dry as speedily as if its clothes were saturated with pure water, nurse to the contrary notwithstanding. Indeed, a wet diaper is much worse for a child than a cloth wrung out of pure water, because urine is at once impure and an excoriating fluid. If the little one is chafed—and how many babies are, even in this enlightened age—the wet diaper is a positive cruelty, smarting sharply upon the already sore surface. It is rare to find baby's hands warm when his diaper is wet, and every moment it is left wet is as bad as, if not worse than, a moment spent in a draught of damp air. How many mothers, who habitually neglect this point, would think of allowing baby to run about in wet shoes or in a damp pair of sleeves? Yet the bowels and legs ought to be quite as carefully kept dry."

Clothing. Besides cleanliness and warmth, the other great factor of baby's comfort and good

nature is its clothing. The principles underlying this problem are also few and easily fulfilled. First of all, the garments should be simple and few. They must be warm and soft. Pressure must be avoided, so as not to interfere with the motions of the child. Too tight clothing may interfere with the breathing or digestion, while if too loose, it will form wrinkles and bunches. The "Gertrude suit" fulfills all these conditions. It is composed of three distinct garments, yet shaped exactly alike, which can all be put on together. For the benefit of young and inexperienced mothers, the following detailed description of baby's wardrobe is prepared by one who has given much thought to the subject, based upon practical experience:

"First of all, if you can indulge in such a luxury, provide your baby always with the soft, hand-knit shirts; for comfort, warmth, and flexibility they have no equal, and are particularly desirable on account of being so easy to slip on and off over baby's head, for nothing is more distressing to a child than a stiff, uncomfortable shirt pulled over its head.

"Next to this in desirability is the shirt made of softest silk flannel, which washes beautifully and does not shrink, and which should be opened and buttoned all the way down, in order to secure the child's comfort in changing.

"Next comes the pinning blanket, which is *not* a necessity, but a very good thing for the first two

months, especially for delicate children, since it promotes warmth to the lower extremities. However, if the child thrives, leave it off entirely, thus giving the little one more freedom of its limbs, and use instead a square, the size of baby's diaper, made of cotton flannel (being less heating), bound with simple flannel binding; this folded and placed just under the diaper, and then wrapped loosely around the child's body, protects the other clothes, absorbs moisture and, best of all, can easily be slipped out and changed for a warm, dry one. Think how much easier for both mother and child than to have to undress the baby and take off the pinning blanket, or retain this with the odor and discomfort.

"Next comes the flannel skirt, which should be long enough to cover the toes and gathered on to a linen waist with *arm-holes,* but no sleeves, to be buttoned up and down the back with *flat linen* buttons, to which can be attached the white skirt, thus simplifying the process of dressing and adding much to baby's comfort. Be sure to button the two skirts together before commencing the toilet; by so doing you avoid tiresome turning the child back and forth. Over the skirt a slip of simple white, easily laundried material, with sleeves a little longer than the shirt, completes the wardrobe.

"Avoid the habit of bundling up the baby in sacks, shawls, etc. Let it become accustomed to change of atmosphere and the temperature of a well-aired room, always using discretion in the case of a delicate child.

Now for the *night apparel,* which for the first two months is often used for both day and night purposes, always having a change of shirt, however, as described above; besides, a little night petticoat of flannel, made all in one piece, without sleeves, buttoned in front, loose and flowing down below the toes; last, the little white night-slip, made of cool, muslin material. The sleeves of the flannel shirt and of the little white slip are all that are necessary over a baby's arms, with proper bed covering, which should be warm and light. Many children are made restless at night by heavy, burdensome covering and hot flannel double gown and wrappers. A soft, knitted blanket, not a comforter, thrown over the shoulders when taken out of a warm bed is all the further protection it needs against the possibility of taking cold. Before the night dress change is made, rub baby's back and extremities and toast its toes before an open fire, if possible. Always be sure that the little feet are warm, for no child can sleep well with cold feet.

The new-born babe, having been made clean, warm and properly dressed, should be placed in a crib upon a soft mattress without a pillow, or at best a small hair pillow—never any made of feathers—preferably upon its right side; covered comfortably and allowed to take a quiet sleep.

Sleep. The infant *ought* to sleep most of the time. After you are sure it is comfortable, dry and warm, lay it down and let it alone. Do not tempt

it by rocking, carrying, giving breast or nipple. Even if it cries a little it is not well immediately to take it up. Turn the pillow, turn it on its side, smooth its clothing and often it will drop off to sleep again. Look out for glaring light, sun or artificial, noise, etc. This is all true theoretically. But do not forget that the young thing needs warmth above all things. Sleep depends on habit and mild but decided purpose. A lack of firmness in the early months of the baby's life may not only render its early years a burden to itself, but an annoyance to the entire household. If the child is sick and restless, the nurse may take it in her arms and sing to it and coddle it; but if well, this is unwise. It is well to warm the sheets before the baby is put to bed, by means of a hot-water bottle or electric pad, as it cannot be too frequently repeated that an infant's body is very easily chilled, and a child will go to sleep more quickly if it is wrapped up in a cosy and warm bed.

Airing Out of Doors. After the child is about one month old it may be taken out for an airing on pleasant days between the hours of 10 A. M. to 3 P. M. Avoid cold winds and direct rays of the sun into baby's eyes. Many a nurse is careless about the latter. There is no objection at all to permitting the child to sleep out of doors. On the contrary, sleeping porches testify to the popularity and benefits of open-air life, both day and night.

Regularity in nursing life is very essential. A child that is put to bed a certain hour every day will quickly fall into the habit of sleeping regularly and soundly. Never allow a child to sleep on its mother's breast or with the nipple in its mouth. On the other hand, every baby loves to be cuddled up and feel the bodily warmth of mother or nurse. Hold it tight against you. If it seems uncomfortable, brace its tempestuous little belly with your warm palm and *breathe* comforting things into its eagerly receptive body, for every mother instinctively knows the miraculous healing charm of cooing her tender sympathy and solicitude into baby's ears. Regularity should be strictly observed in the hours for feeding, bathing, taking the nap and retiring at night. Also, after very few months, he must be put on the chair to pass water at regular intervals and to have a movement of the bowels at the same time every day.

I wish to protest against the cold, matter-of-fact, theoretical rules of training the infant uninterpreted and softened by common sense and affectionate, sympathetic understanding of the needs of the young life.

I wish to protest, also, to your blind obedience to these rules given you off-hand by young physicians and dogmatic text-books. Common sense must ever be your guide.

Résumé. The new-born baby should have clean, dry, warm, soft, loose clothing, drink suitable milk at regular intervals, breathe day and night a warm,

pure atmosphere, be kept absolutely clean and dry, and protected from all strong sensory impressions, so as to enable it to sleep most of the time. Regularity is the key-note of successful nursery management. The early adoption and faithful enforcement—not necessarily iron-clad enforcement—of a schedule for infant's feeding, sleeping, bathing and habits, arranged after careful study of its peculiarities and changed with advancing age, is a wise act, and will repay in producing happy, healthy, responsive children and happy homes.

The first bath and dressing having been accomplished, and the baby enjoyed its first nap, it is now ready to make attempts at nursing, which introduces at once the important chapter on

HOW TO FEED THE INFANT.

As a rule, it is well to put the child to the breast after the first long nap of the mother, which is so essential to her welfare and speedy recovery, though the baby probably needs no nourishment for the first twelve hours. However, in order to appease its crying, should it do so persistently, and the anxious fears of the household lest it be starved, a teaspoonful of warm, sweetened water now and then may be given. The very fact that the breasts do not secrete true milk until after two days, shows that it is not essential to the child, although the fluid found in them at this time, the so-called colostrum, contains necessary salts, and by its slightly

purging effect acts quite wholesomely on the contents of the child's intestinal tract. Again, the influence of suckling reacts favorably upon the mother's organism, aiding the re-establishment of the natural state of things. Of course it is practically impossible to do otherwise for the first week or two, but give baby the breast whenever it awakes, perhaps every hour-and-a-half or two hours, but as soon as possible it will be advisable to establish regular times for feeding: every two hours during the day, and every four hours at night—that is, one meal between 9 P. M. and 5 A. M.; but after three or four months this night meal should be omitted in the case of every healthy child, and the day meals given every three hours. The duration of a meal is usually twenty minutes, and it may be prolonged, especially with weakly infants, to thirty and thirty-five minutes. A really healthy babe does not sleep during nursing, but afterwards. There may be some difficulty at first in getting the baby to suckle. It must be trained to it, and it often requires a good deal of patience and knack on the part of the nurse. There are a few points worthy of special remembrance. The mouth of the infant and the nipple of the mother should be carefully wiped with a soft cloth dipped in warm water before and after each nursing, and the breasts themselves protected from every pressure. The baby's head must be so held that it cannot jerk backwards, and the nose must not be pressed into the breast, for obviously then it cannot breathe. The hori-

zontal position is best while the mother is convalescing, thus securing her rest and protecting the pelvic organs from pressure by weight; but frequently all sorts of positions must be tried before the baby's efforts at nursing prove successful. As a general rule, *the baby should always be fed when in the semi-erect position; never when lying down.* Breast-babies are in the proper position when the mother or wet-nurse is sitting up. Excepting, perhaps, occasionally at night, when the mother or nurse is too tired to sit up and nurse her baby, breast-babies do very well in this regard. But bottle-babies are too apt to be fed while lying down. The infant's stomach is so constructed that food is easily regurgitated, especially from the horizontal position. Therefore, babies fed in this position are unable either to get a sufficient amount of nourishment or to retain all that which they do get a sufficient length of time to have it absorbed. Again, the liver is relatively very large in the infant, and when baby is lying down encroaches upon the capacity of the stomach to such an extent that a sufficient quantity of food cannot be taken.

The quantity of milk which a mother secretes during the first few weeks is about one pint in twenty-four hours. As the needs of the child grow, the amount is correspondingly increased. If there is abundance of milk, one breast is enough for one nursing and the baby empties it after ten to fifteen minutes, is satisfied, falls asleep and should be at once removed. If it gets too much, it will regurgi-

tate the milk, which need not alarm you, as it is not a true vomiting. About two ounces is the usual quantity of a meal at this early time.

If the mother has a sufficient supply of healthy milk, *the child needs absolutely nothing else for the first eight or nine months,* or until the teeth begin to appear. Unfortunately, many mothers cannot, and some who could will not, fulfill this highest use to their offspring. Frequently, too, after the fourth or fifth month, the mother's milk decreases or becomes deteriorated in quality, or her strength suffers in consequence of the nursing, and so it becomes necessary to substitute some sort of artificial feeding. This need is met by innumerable infant's foods advertised everywhere, and the market becomes thus flooded with all kinds of substitutes of mothers' milk; *all of which, when compared with nature's article, are inferior to it,* without any exception, and most of them only more or less objectionable. In choosing a substitute we must remember to secure one that bears closest resemblance to mother's milk. This must ever be our guiding principle; but, further, we must also bear in mind that the infant's assimilative powers are very limited, and that it reacts violently against imperfectly digested substances.

Remember, that Homœopathy possesses remedies that greatly modify abnormal conditions of lactation, and these should first be tried before resorting to artificial food.

By their means a poor quality of mother's milk may be improved, or an insufficient quantity increased.

If the milk supply is insufficient, the diet must be made as nourishing as possible with a good amount of albuminous and fat-producing materials. Massage, stroking the breast toward the nipple and kneading it gently by the nurse if her hand is soft, preferably when empty. It is important that the child should nurse well; this favors the production of milk. Only one breast should be nursed at a time, so as to empty it entirely. Each nursing should not last more than about twenty minutes, and the intervals between nursings should be long.

Again, if the mother's supply is limited and must be supplemented by artificial feeding, do not hesitate to let the baby have as much breast milk as obtainable. The two methods of feeding are not incompatible. Especially during illness, the breast milk, though scanty, may prove sufficient to tide over a dangerous crisis.

Mother's milk is the one *perfect* food for the baby. *There is no true substitute.* None furthers in the same degree the physiological development of the child. None is so surely a prophylactic against dangers of the first year. It alone is the guide for preparation of all substitutes. One of the great differences between woman's milk and other milks is that woman's milk is richer in *lecithin,* which forms a large part of the brain and nerves. The need for this is seen in the difference of nervous

development at birth between the young of animals and man. The latter needs material for building up its nervous system, which is practically already formed in animals at birth, and this is found in woman's milk. But while we may closely approximate the different constituents, we always shall miss that mysterious and vital action that in each case adapts the condition of the milk to the condition of the child, and which is not revealed by the microscope or chemical analysis. Herein lies the difficulty of artificial feeding. Even a milk that our chemical analysis proves to be lacking in some constituents *may be* the best possible food for the infant *at that time, and we should be very chary in taking the child from the breast if the health of both mother and child is fairly good.*

The artificial food, while containing all the necessary nutritive elements in the same proportion as mothers' milk, must be free also from all foreign matter liable to produce mischief in the digestive tract—as foods containing starch, too much sugar, etc. What shall it be? is the important question to be solved. Naturally enough our first thought is *cow's milk;* not necessarily milk from one cow, as was held so strenuously some years past, but good, pure cow's milk, such as ought to be obtainable at all times. Only be sure it is delivered to you clean and in as pure a state as possible and undiluted. This in our larger cities, is provided for by establishments furnishing "certified milk." Now, by comparing both kinds of milk with each other, we

notice certain differences of composition, which we must bear in mind in order to prepare cow's milk in the most acceptable form for the baby's power of digestion; that is, by bringing its composition most nearly to that of mothers' milk. Without going into the minute analysis, it will be sufficient to call attention to one or two of the chief differences in their composition.

CHEMICAL ANALYSIS—AVERAGE FIGURES.

Suppose we have 1,000 parts of human milk, we have 880 parts water, 120 parts solid. The solid matter is divided into casein 27, sugar 50, fat 40, salt 3. Notice there is no starch. Specific gravity 1,028. It is alkaline in reaction and 98-100° F. temperature. The accepted *average* percentages of the chief nutritive constituents of milk are as follows:

	HUMAN MILK.	COW'S MILK.
Fat	4%	4%
Proteids	1 to 2%	4%
Sugar	7%	4%

It is very difficult to get unvarying analyses, because it is not an invariable fluid, any more than any other animal fluid. *Nature tries to adapt the milk to the child's condition.* The digestive capabilities of infants differ, and nature provides a variety of breast milks accordingly. Therefore, *no routine mixture* will in all cases prove successful. No iron-clad rule holds good for a living body.

Of the ingredients of milk, we find that cow's milk contains decidedly *more proteids* and salts

and *less sugar,* and about equal amount of fat. For all practical purposes, therefore, we approach very nearly the composition of mother's milk by simply diluting cow's milk with water and adding sugar of milk. The water for this purpose should be previously boiled. It is not advisable to dilute the milk, except perhaps for the first few days, with more than an equal amount of water, since by a greater dilution we lessen the quantity of fat contained in the milk too much, which is a very important factor in the development of the infant's organism. After a few months, two or even three parts of milk to one of water will give the right proportion.

Top Milk. By the addition of cream or use of top milk the fat percentage is retained, yet experience proves that children thrive even better by the use of cow's milk as a whole. As Prof. Jacobi recently said, "The frequent injury inflicted by fat feeding is being rediscovered. The top-milk gospel is a heresy." That is my experience when top milk is used as a routine measure; but when fat is needed, it is of great benefit.

The difference in the quantity and also in the behavior in coagulating of the casein forms the most important practical difference between the two kinds of milk. For while the mother's milk coagulates in minute particles, that of the cow causes a curd of comparatively large tough masses, which fact explains its more difficult digestion, requiring

more time for the digestive fluids to penetrate and dissolve them. Now, it is a fact that the addition of lime water, securing as it does the alkalinity of the milk, also makes a difference in the formation of the coagulum, and it is quite rational practice on the theoretical grounds to use the same. Still I should prefer to avoid its regular and continuous use and employ it only at times, or when gastric irritation plainly calls for it. The best substitute, then, for mother's milk during the entire period of infancy is cow's milk suitably modified.

Top milk is the upper third or half of the milk which is taken off after it has stood for six or eight hours. It contains three times as much cream and less curd and other solids. If this is diluted with two parts of water and sugar added, it is nearly like mothers' milk. While this is theoretically true, I have often found that many babies do not digest food containing the prescribed quantity of cream and thrive perfectly on food deprived of it for a time.

Given then clean, fresh, pure cow's milk, kept in absolutely clean bottles, we need but the addition of a certain proportion of boiled water and sugar of milk to make the most acceptable practical substitute for mother's milk. Such a milk ought not to be sterilized or pasteurized—merely heated to the proper temperature. Top-milk mixtures, pasteurized mixtures, all other modified mixtures by various additions are not advisable, and are unnecessary in well children, *provided the milk is all right.* To

insure this, there must be the strictest possible official supervision of the product from the dairy to the consumer. The following are the simple methods of preparing such clean, fresh, pure cow's milk:

DIRECTIONS FOR MODIFYING COW'S MILK.

The following receipts will change cow's milk into food mixtures suitable for infants up to one year:

FOR FIRST MONTH.

Cow's milk	1 tablespoonful
Boiled water	2 tablespoonfuls
Sugar of milk	small ½ teaspoonful

This amount should be given every two hours. Strong and large children may need rather more; others less.

After first month to third month, cow's milk and boiled water, equal parts, and then two parts of milk to one of water, gradually increasing both the strength and quantity of milk and lengthening the interval between feedings according to the age of the child; or the following can be used with advantage—made with one quart of cow's milk. Each feeding should consist of three to four ounces:

FIRST 6 MONTHS.		FROM 6 TO 9 MONTHS.	
The top milk	½ pint	The top milk	1 pint
Boiled water	1 pint	Boiled water	1 pint
Milk sugar	1½ ounces	Milk sugar	2 ounces

FROM 9 MONTHS TO 1 YEAR.

Top milk	1½ pints
Boiled water	½ pint
Milk sugar	3 teaspoonfuls

Dissolve the sugar in hot water, add the cream, and divide in separate bottles, putting one feeding in each. Cork them with clean cotton. But it must be remembered that too high percentage of fat (3 to 4%) is often excessive. Therefore top milk and cream addition must often give place to plain milk properly diluted. The digestion of fat retards the flow and diminishes the amount of gastric juice and lowers the digestive powers.

STERILIZATION AND PASTEURIZATION OF MILK.

The fact that an *absolutely clean, pure, raw milk* is extremely difficult to obtain on a large scale in our great cities, is the justification of applying some method to render it comparatively safe, notwithstanding that sanitary dairies do all that is possible to protect milk from contamination; yet the vast population of our larger cities are compelled to obtain their milk supply often from sources about which little is known.

As it is practically impossible to procure cow's milk wholly free from germs, the only method to render it so is to sterilize it, that is to kill the germs, which is practically accomplished by boiling the milk for five minutes. But there are disadvantages encountered, the chief being the destruction at the same time of the native bacteria of the milk, that bring about its fermentation and solution of the curd, rendering digestion more difficult. The curd

coagulates in larger masses. To meet some of the objections *pasteurization* is practiced.

Pasteurizing is a modification of sterilizing. It consists in subjecting milk to a temperature of 140-150° F. for half an hour, instead of to 212°, and then suddenly cooling. This pasteurization of milk *at home* is capable of destroying practically all the disease germs that we fear in milk and probably does not impair the nutritive properties. But commercial pasteurization of milk cannot be countenanced. It is apt to cover up not only poor quality of milk but lack of cleanliness in handling the milk, and must be condemned.

In using the sterilizing bottle, we dispense with the ordinary nursing bottle, as it itself is used by simply removing the cotton plug and fitting it with a rubber nipple, and then set in a cup of hot water until the contents are heated sufficiently (95-100°).

It probably is justified in our cities, especially during hot weather, where the milk can rarely be promptly served to customers, to thus prepare it for purposes of infant feeding, *but this does not apply where we can obtain clean, pure, fresh milk, and the baby is in good health.* Too long continued use of sterilized milk may result in impaired nutrition, anemia, scurvy and dyspepsia, which can only be removed by a return to coarser, less scientific, more old-fashioned method, as I have repeatedly verified. By carefully watching the growth and development, however, and the occasional use of

Practically all methods of preparing the milk for the infant that are of real value have the common purpose of enabling the infant to digest successfully the casein of cow's milk in sufficient quantity to thrive.

In order to facilitate the breaking up of the casein of cow's milk, we have two ways of acting upon it—the mechanical and physiological.

Oatmeal, barley, gelatine, dextrine, some infants' foods like Eskay's, Mellins, Horlick's, act mechanically. But these additions may be injurious under three months on account of the starch. I prefer barley as a rule.

The physiological method consists in peptonizing the milk. The extract of pancreas will digest casein, but this peptonizing milk ought not to be done as a regular thing for healthy children, as their digestive organs, not being called for on regular duty, are weakened thereby.

Admixture of Cereals is advisable for the purpose of dividing and suspending the casein of the cow's milk. The simplest flours, mainly rice and oats (which have a finer microscopical structure than wheat) and cereals generally must be given to make teeth when milk food alone does not suffice for their development.

Rice Water is very nutritious and soothing, especially in intestinal troubles. It may be used instead of barley water, or change off with it as a diluent in modifying cow's milk. To prepare it wash one ounce of rice with cold water; then macerate for

three hours in a quart of water kept at a tepid heat and afterwards boil slowly for an hour, and strain. Or a

Rice Paste may be made by adding four tablespoonfuls of rice to three pints of water, boiling half an hour and then setting aside to simmer, water being occasionally added to maintain the three pints. This is strained and cooled, when a paste is formed. Three tablespoonfuls of the paste are added to half a pint of milk.

Oatmeal Water for this purpose is made by soaking a teacupful of oatmeal in a pint of water, with a little salt added, over night; strain thoroughly through a thick napkin next morning. To make

Barley Water, take a teacupful of pearl barley and soak it for half an hour in a little lukewarm water previously salted, drain off the water, pour the barley into a pint of boiling water, and let it simmer one-half hour; when done, strain into a pitcher. By giving the preference to the oatmeal water if there be a tendency to constipation, and to the barley water if the tendency is to looseness, the bowels can be regulated without any trouble.

Next in importance to pure cow's milk modified as an article of diet for infants, prepared as stated above, comes

Cream. One part of pure cream to six and very soon to five, and four parts of water and a tablespoonful of sugar of milk to a pint of this mixture

forms an excellent food, and one strongly recommended by many physicians, if fat is needed.

A mixture of equal parts of milk, cream, lime water and a weak arrowroot water with a little sugar is good. The following very closely resembles mother's milk: Fresh cream, 2 tablespoonfuls; cow's milk, 1 tablespoonful; lime water, 2 tablespoonfuls; warm water, 3 tablespoonfuls; add sugar of milk, 1 teaspoonful. Occupy about 5 minutes in warming, stirring gently meanwhile, but do not boil. Add a small pinch of salt.

Condensed Milk has been very popular as a substitute for mother's milk. The great objection to the ordinary condensed milk is the large proportion of sugar it contains, nearly 40 to 45 per cent, and the relative small proportion of albumen and fat. Now, by diluting it as required we either have too much sugar in our preparation or too little of the other nutrient constituents. In either case it fails to be a perfect food to the growing infant. Still it cannot be denied that many children fed upon it certainly seem to thrive; nevertheless I should be afraid to use it exclusively after the first few weeks. It ought to be diluted with eight to ten parts of warm water, the tendency being to preparing it too strong. It cannot be denied, on the other hand, that intestinal catarrhal affections, and if continued for longer periods, rickets are especially frequent in children fed exclusively on ordinary condensed milk. The nutritive value and digestibility of it may be increased by using oatmeal or barley water as a sub-

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A very good preparation is the following, which may come into use when from any cause substitutes as prepared above do not agree:

Take a piece of isinglass or gelatine about two inches square and soak for a short time in one-half pint of cold water, and then boil until dissolved for ten minutes. To this is added, with constant stirring, a teaspoonful of arrowroot rubbed smooth in one-half pint of milk, and just before removing from the fire one to two teaspoonfuls of cream and a little sugar is added, the quantity of both to be increased according to the age of the child.

It seems to me that in all cases of artificial feeding of infants, a reliance on the methods above described will secure the most desirable end—the healthy growth and development of the child. Only when all these fail, and the failure is not dependent upon faulty methods of giving the food, as pointed out below, is it advisable to give one or the other of the numerous prepared substitutes. Of the more popular of these are undoubtedly Mellin's, which is often useful in constipation and is fattening, Nestle's Eskay's, and Horlick's.

They all depend for their basis on milk. They are mere adjuvants to milk. There are three different types.

1. *Milk Foods. Nestle's* is the chief representative. It is a condensed milk dried with starch and glucose. But the starch in these preparations is apt to be a disturbing factor before the third month.

2. *Cereal Foods* with starch unchanged, represented by *Imperial Granum, Ridge's Food.* Cereal foods with starch claimed to be converted into sugar, the Liebig Foods. They are dried preparations of grain, with malt, part of which is converted into dextrine. Mellin's and Horlick's are the best examples.

Bear in mind that there is no cast-iron rule. Each child differs from another and each case must be individualized. But I would confine their use rather to diseased conditions when, according to the needs of the organism, one or the other, according to its composition and digestibility, may be required, relying on the various forms of milk, as above described, for regular feeding.

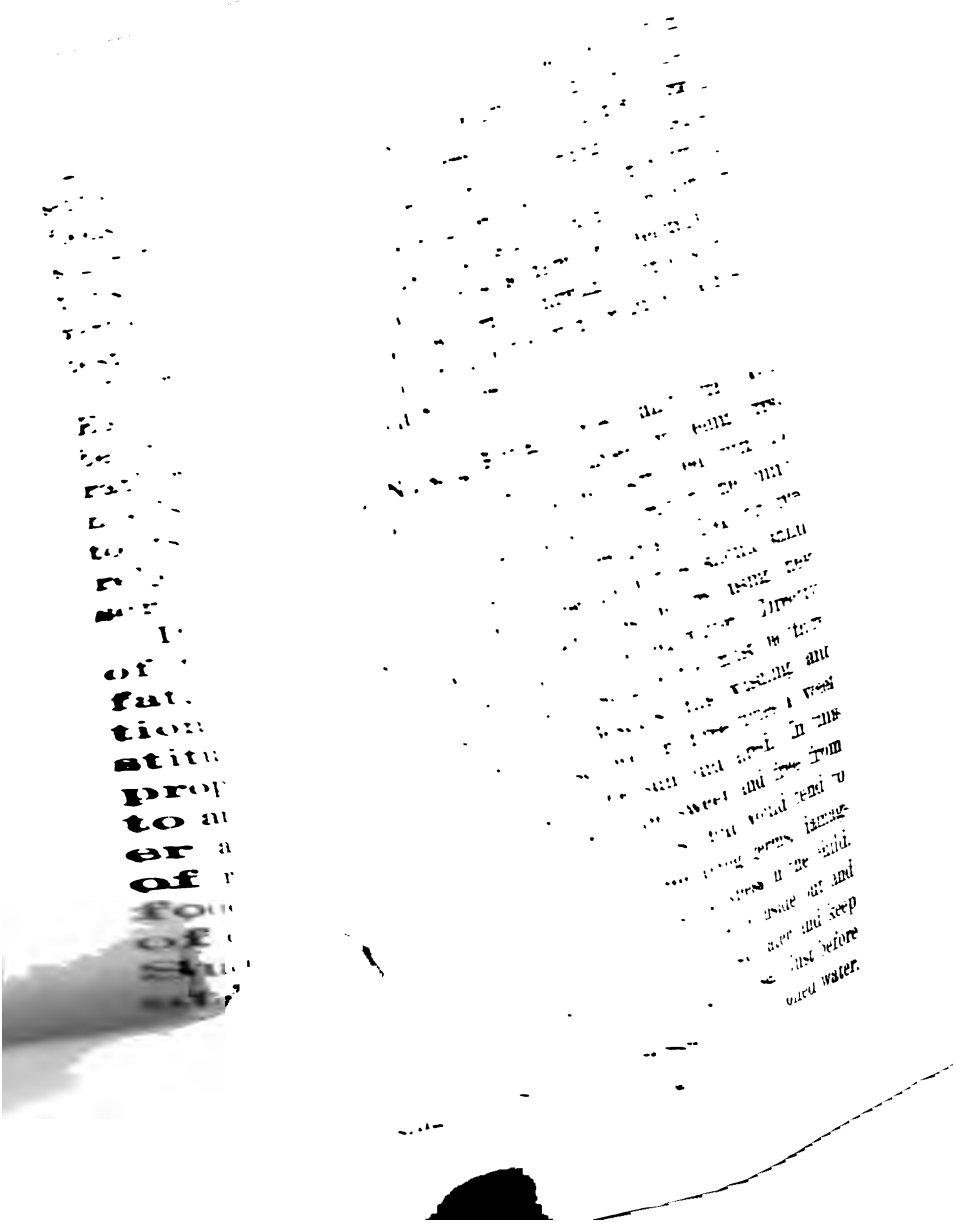
It may be put down as a general rule that most of the prepared infant's foods in the market lack fat, a very essential element for the child's nutrition. Fortunately they are not intended as substitutes for milk, but are most all prepared with proportion of milk. In this way the milk makes up to an extent the deficiency in fat. Lack of the proper amount of fat seems to favor the development of rickets. It is well to supplement these infant's foods when they must be employed with inunctions of oil, especially when the child seems ill-nourished. Such inunction with olive oil may be made daily at bedtime, or even twice a day in case of wasting, all over the child's body. It will not alone be an additional source of nourishment, but frequently correct nervous restlessness as well.

Still another necessary article of diet as an adjunct to all others is *water*. Have it boiled and cooled before using it. It is too apt to be forgotten as a daily need for baby's comfort, for babies do get thirsty and crave for pure, fresh water. *Offer it several times during the day* and you will see that it is greedily taken when the ordinary nourishment is perhaps refused. Bottle-fed babies are apt to be overfed, and the substitution of water rather than the prepared food once in a while will not only correct the troubles arising from overfeeding, but equally satisfy the body. The addition of a teaspoonful of sugar of milk adds to its nutritive value.

Again, do not forget, as soon as a few teeth have appeared, to give the child a hard crust of bread to chew. It is one of the best things and should never be excluded, no matter what food is determined upon. It will aid in developing the jaw and teeth, matters of greater importance to the early age than brain development.

I have said nothing of the wet-nurse, as her modern substitute is undoubtedly the feeding-bottle. It is so difficult to get the right person for so delicate and important a function, and withal so expensive, that practically it is ever a questionable procedure. Should one be determined upon, the selection must always be entrusted to the family physician.

Much of the success of artificial feeding depends upon the care exercised in preparing and



Black rubber nipples alone should be used. Sometimes the holes in the nipple are very small and must be enlarged with a darning needle. Still the milk should not run out in a stream, but only *drop by drop.* For the food must not be received too quickly nor too easily, and not without some exertion at sucking—the very conditions nature makes in furnishing the breast-milk to the suckling babe. The chief objections to all nursing bottles is that they allow too rapid and free swallowing of the milk, thus over-distending the stomach and producing colic and indigestion. Again, the baby's food should always be given warm, about 98° F. *Never give cold milk to an infant;* it is likely to disagree. Never allow the baby to continue to suck after emptying the bottle or on the nipple without the food. Aside from the injurious results, as seen by the colic, diarrhœa, etc., it establishes a vile habit, which will tyrannize over child and mother for a long time.

The success of cow's milk, either used alone or as an adjunct to prepared infant's food, depends, of course, upon its quality and upon the methods of keeping it until it is ready for use.

It must be unadulterated, pure milk, and should be slightly alkaline, but sometimes it is slightly acid, in which case it is very apt to disgree with children. It is advisable to test the ı by means of a strip of litmus paper, ob- ; in every drug store. Good milk will red litmus paper to blue after some min-

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tion requisite for success. When baby does not thrive before discarding your food, see to it that every step in its preparation is done perfectly, and not until you are satisfied on this score, change the food for another.

The Quantity of Food. A new-born baby's stomach holds without distension about two tablespoonfuls, but you must remember that there is a difference between a functionally active stomach and one experimented with in the laboratory. The fact that many babies have been overfed led to the opposite extreme, and I am sure many of the directions now given by many physicians are for an *insufficient* amount of food. There is no hard and fast rule. I am inclined to allow a baby to have as much as it will take, but am rather rigorous in exacting a suitable long interval between drinks.

The Tests of a Proper Diet. Gain in flesh and weight, not necessarily rapidly, but steadily.

Flesh should be firm and solid, not flabby.

Teething and walking should progress steadily.

Healthy skin.

Quiet, peaceful sleep.

Colic, indigestion and diarrhœa are sure signs of improper diet.

Mistakes in Infant Feeding. 1. *Giving too much food at each meal,* or giving it too rapidly or too

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WEANING AND FOOD FOR OLDER CHILDREN.

Whenever mother's milk becomes scanty or of poor quality as shown by the child's health, or the appearance of menstruation or pregnancy, then weaning will be in order. When the teeth appear, about nine or ten months, it is a sign that the child is ready for something more than mother's milk.

With some care and painstaking, there ought to be no difficulty in making the change. The old fear of the "second" summer is, on the whole, an idle one, and it is a good rule to substitute other food for mother's milk just as soon as the child shows lack of steady gain in strength and weight. So long as it keeps plump, does not fret, and thrives generally, and the mother's health is also not disturbed, it is doing well, and no immediate change need be hurriedly inaugurated.

When the child is about one year of age, it is a good average time to wean it, though it is well not to do so in the midst of very hot weather. It should be a *gradual* process, and it is well, therefore, to give a meal of artificial food (properly prepared milk) once daily for months before.

Diet After Weaning. The essential characteristic must be *simplicity*. Avoid too much variety until the teething process is accomplished. Thus,

until after the second year, it is desirable that only milk and milk foods should form the *staple diet* of all children.

After the third year the child gradually adopts the varied diet of adults, though I never worry if meat is not taken before the fourth year. Even a good diet will not agree with all children. The differences in constitution and temperament are so great that no one prescribed diet can possibly apply to all. Frequently it becomes largely a matter of experiment to find the best diet for any one individual case; do not fear to change if the child is not prospering.

Remember that *a child should gradually gain in weight and strength.* Loss of flesh in a child not apparently sick, indicates almost always faulty food or feeding. Its flesh should be firm and solid, not flabby, as is so frequent in children brought up on condensed milk alone, or too much starchy food. Now, if with these evidences of good nourishment, the child has no frequent attacks of colic, crying, indigestion, sleeps well, has a healthy skin, you may be sure that its food, whatever it may be, agrees with *that* child, however inadvisable it might be to force all other babies to the same dietary.

Milk contains considerably *less* iron than the other foods. Hence milk is not a sufficient food for anæmic, and for children after the suckling period.

A good addition to milk is oatmeal or barley, the latter being preferable as a steady diet because oat-

meal, on account of its containing fat and mucin, tends to relax the bowels. This can be advantageously substituted when there is a tendency to constipation. In regard to the kind of barley to be used, it is best to employ the *entire kernel,* including the yellow outer layer, which contains gluten. This ought to be finely ground and allowed to boil five hours, in order to let the outer layer burst.

The *pearl barley* is the inside kernel freed from the husk, and the prepared barley flour of the shops is very white and made from it, but both are inferior for our use to the entire kernel.

A good preparation is the *oatmeal or barley milk,* made by boiling a teaspoonful of oatmeal or ground barley in four ounces of water for a quarter to half an hour and then adding an equal quantity of milk.

After six months some addition of farinaceous food to the milk will be useful. *Now* any of the numerous patent foods, like Mellin's, Horlick's etc., may come in as an *addition,* but not as a substitute for milk. The starch in these preparations is supposed to be converted into dextrine, so as to be readily acted upon by the digestive organs. For general use they are all too expensive, and every household can prepare for itself, from ordinary good flour, a preparation of dextrine by resorting to the old-fashioned *flour-ball,* made by taking a pound of flour, tying it lightly in a cloth, placed in water and boiled for ten hours. Afterwards, when cold, the softer outer covering of the ball of flour is cut away and the hard interior is re-

duced to powder with a fine grater. This powder, exceedingly light and delicate, is of pale straw color. One or two meals a day can be given. For each meal, one teaspoonful of it is rubbed up with a tablespoonful of cold milk into a smooth paste; add cold milk until it has the appearance of perfectly smooth cream. A quarter of a pint of hot milk, or milk and water, is then poured upon the mixture, stirring briskly all the time, and the food is ready for use. Or one teaspoonful of this baked flour can be added to one of oatmeal; this is beaten up till smooth with four tablespoonfuls of cold water, and then boiled with three quarters of a pint of milk until it thickens. A little sugar and salt should be added.

Besides milk we have, on the one hand, the various mushes or porridges and other farinaceous foods; and on the other, different meat broths.

The most valuable of the mushes are oatmeal, cracked wheat, graham, germea, cornmeal, sago, barley, rice, etc. Children like to have a variety, and prefer different ones at different times, if permitted to exercise their choice. There are a few general rules to be observed for making porridges for our purpose which are essential. First, see to it that the cereal is of the best kind, not musty or stale; secondly, the milk must be fresh, the water clean and boiling, and never cooked in iron or copper, and always in a double boiler to prevent burning; and, lastly, be very particular in having it *thoroughly* cooked. Add sugar, but not too

much, and have it seasoned moderately with salt, and give good milk or cream. Feed slowly, and teach children to chew well even soft food. A good preparation of these farinaceous foods is obtained by making them according to the following receipts:

Oatmeal Mush. One cup granulated oatmeal, one-half teaspoonful salt, one quart boiling water. Put the meal and salt in a double boiler, pour on the boiling water, and cook two or three hours, stirring occasionally with a fork. Serve with sugar and cream. For older children, a baked apple or apple jelly may be served with it.

The oatmeal is especially adapted to children who have a tendency to constipation.

Cornmeal Mush. One cup cornmeal, one-half teaspoonful salt, one cup cold milk, one pint boiling water. Mix the meal and salt with the cold milk and stir gradually into the boiling water. Cook half an hour in a double boiler, stirring often.

Graham Mush. Mix half a cup of graham flour and half a teaspoonful of salt. Make into a smooth paste with a little cold water. Stir all into one pint of boiling water. Cook twenty minutes, stirring often.

Farina Porridge. Half a pint of boiling water, half a pint of fresh milk, one large teaspoonful of

Broths are an acceptable change from milk, and serve well for the noonday meal. Sometimes milk does not agree, and then broths form our mainstay. Veal, beef, mutton and chicken broths, made by taking one-half a pound of meat to a pint of water for younger children, and one pound to a pint for older, make nourishing and agreeable foods. Rice, barley, bread, crackers, etc., may be added. Great care should be taken to have all fat and gristle removed from the meat when cutting it up. It is then put into a saucepan, covered and allowed to stand by the fire four or five hours, and then simmer gently for two hours. It is then strained and seasoned with salt.

The following receipts have been tried and found excellent:

Beef Juice. The expressed juice of beef is made as follows: A tender steak, cut an inch and one-half thick, should be broiled till cooked through, but not beyond blood-red color. The juice should then be squeezed out with a lemon-squeezer, or better still, a meat press, and seasoned. One or two teaspoonfuls may be given at a time with stale bread crumbs to a child over one year old.

Broiled Beef Essence. Broil half a pound of round [illegible] one or two minutes or until the juice wil[illegible] at into small pieces and squeeze the ju[illegible] bowl placed over hot water. Add a [illegible] lt and serve at once or pour it over a [illegible] hot toast. Or a

Beef Tea may be made by adding half a cup of boiling water to the meat after broiling as above.

Beef Tea with Oatmeal. Mix two tablespoonfuls of oatmeal very smooth with two of cold water; then add a pint of strong boiling beef tea. Boil together for five minutes, stirring well; strain through a sieve.

Bread, wheaten, graham or rye, should be given when comparatively stale. All hot bread and biscuit should be forbidden. Baker's rolls, especially when a day old, are good; graham crackers, sea-foam crackers may be taken with the broth, or broken into it.

Zwieback, to be had of all German bakeries, is an excellent change, and forms with milk a good supper. Children as a rule learn to like it very much. Milk toast, cracker toast, sponge cake, lady fingers, bread and butter, all form excellent foods. Do not deny the child fat in some form, good butter, or bacon fat, to which is added some bread crumbs or mealy potato. The potato must be *baked,* not fried or boiled, and only the mealy ones selected. This with a little dish gravy or fresh butter and salt is usually found an agreeable change of food.

Eggs should be soft boiled or poached, not fried, and may be given occasionally; so the plain cus-

tard, i. e., egg, milk and sugar without spices, may be tried at times.

Eggs constitute a very important food for children. The only article of diet that approaches milk in the quantity of lime which is so essential for the growing organisms is the yolk of the egg. This should be given to the child where milk cannot be tolerated or assimilated, and in cases of debility. Here it is best digested when beaten up with a few drops of brandy. Here is a good preparation:

Eggs as an Infant's Food. Beat up the raw white of a fresh egg; add to this water to make 8 ounces, and one teaspoonful of pure cane sugar. Strain through muslin. Put 1 ounce into the feeding bottle and stand it in hot water at 110° and heat to blood heat. After several days a little of the yolk of egg and a few drops of raw meat juice may be added. Codliver oil emulsion or Hydroline, about 5 drops to each feed, may be added at times for weakly children.

When the eye-teeth are through, a portion of a soft boiled or dropped egg may be given, but solid animal food must not be given until all the teeth have appeared at the very earliest.

Fruits when ripe and fresh, are good and ought to be allowed liberally. See that the fruit is not stale, that is the most important point. Be sure

Oranges.

with seeds

a year is

baked apples

useful

more generously to milk diet and fruit and your child will be all the better for it.

Coffee, tea, however weak, and it is almost needless to add wine and all other spirits, must be rigorously excluded from the child's dietary. No "tastes" should be allowed. Milk and water, the latter filtered and boiled, and for older children plain cocoa, ought to constitute the sole drinks.

Buttermilk is an excellent infant food, especially in cases of diarrhœa and vomiting, and for run-down states and inherited disease tendencies. The feeding with buttermilk should begin in small quantities, frequently repeated, and it may be used alone or with other foods. When pure, fresh buttermilk can not be obtained, families churn a little butter at home to provide the babe with its buttermilk every day. It is prepared by stirring a level tablespoonful—about 10 to 12 gm.—of fine rice, wheat or other flour into a liter of buttermilk less than twenty-four hours old. It is then boiled over a moderate fire until it boils up thrice, stirring continuously, after which two or three heaped tablespoonfuls of sugar are added; or it may be boiled down and mixed with wheat flour, sugar and salt. Thus prepared, it has been used by the Dutch peasants for generations. The introduction of *lactone* (the lactic acid bacilli in pure culture) enables the ready conversion of sweet milk into a product resembling buttermilk

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produce a discharge from the rectum. At the same time give a dose of *Nux,* 2 pellets every 2 hours.

For the retention of urine, cloths wrung out in hot water may be placed over the region of the bladder or baby's back. Give a few doses of *Aconite* when baby is in evident pain, manifested by restlessness, crying and sleeplessness. Dose: two pellets every hour.

For the first few days after birth, the urine is naturally high-colored from the excess of urine salts excreted. The diapers are often stained in consequence. If this should continue too long, a few doses of *Lycopodium* will correct it. Give 2 pellets every three hours.

Chafing or Soreness of Infants. A redness and soreness of the skin, affecting the buttocks and folds of the thighs. Due usually to lack of care. It generally arises from napkins saturated with urine being allowed to remain on, thus causing irritation of the skin. It is true ,however, that constitutional causes may also contribute towards this trouble; thus, the condition of the urine above described may favor its development. The treatment is largely preventive. Change the diapers just as soon as soiled. Never use a diaper that has not been rinsed out in water. Do not merely dry
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.e difficulty. Always bathe the infant's
every passage; dry with a soft cloth,

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sician. There is a violent and dangerous form of inflammation of the eye in the new-born, resulting frequently in the destruction of the eye. It is the result of infection with a poisonous virus. It is advisable, therefore, always to refer all these cases to your physician whenever possible.

Jaundice. New-born infants, during the first few days after birth, have more or less intense red color of the skin, which gradually fades and disappears in about a week; sometimes it gives place to a more or less bright yellow hue, which is known as jaundice of the new born. This usually lasts several days, and gradually disappears in eight to fourteen days. No special treatment is necessary, but remember that impure air, cold, use of purgatives and weakness of the infant, favor its development. The urine colors the napkins; the stools are pale and dry, or thin and watery. Child is drowsy, disinclined to take the breast. A few doses of *Chamom.*, two pellets three times daily, especially if the child is peevish and fretful, may be given. *Bryonia,* same dose, may be substituted, if the stools are constipated, large and dry. If after several doses both urine and stool do not assume their normal type, give *Lycopod.* 30, two pellets three times daily. This is especially indicated if the child is drowsy, weak and spiritless. If the urine and stools change, even without change of color of skin, the little patient is improving, though the jaundiced skin remains unchanged for a time.

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daily. If not sufficient, follow with *Sambucus* in the same dose. A little almond oil applied with a camel's-hair brush, or cold cream, or the vapor of hot, not too hot, water allowed to pass up the nose, are all efficacious.

Crying, Wakefulness, Restlessness. *The Baby's Cry.* This is the first language of the new comer. It is only the *human* animal that cries when born. It is a sign that there is a human soul within. Much can be learned by the observant mother or nurse from baby's cry. If it is long and persistent, it is usually due to hunger, and will cease when giving it food, or even for a time some sucking device until it realizes the deception—then woe to the environment. If the hand is drawn up to the ear or head, with loud and sudden screams, it is likely due to earache. Apply heat and give *Aconite* every few minutes, a few pellets. In colic, the knees are drawn up to the abdomen and the cry is sharp and loud and paroxysmal, and is relieved by warmth and pressure. Apply these and give *Chamom.* Infants do not cry without some cause. This is certainly true of frequent and long-continued fits of crying. The first thing to do is to discover the cause. The child may be hungry, wet, cold, especially the extremities, or soiled. The clothing or bed may be wrinkled; he may be in an uncomfortable position; ten the mere turning is sufficient to relieve the tress. Thirst is not rarely a cause of crying in young children, especially is this likely in

attacks of diarrhœa. The cry for water is apt to be a constant wail of low tone, accompanied by marked restlessness. On no condition resort to soothing syrups, paregoric, etc., to quiet the child. After drying and warming him, toasting the toes before an open fire, filling a rubber bag with hot water and allowing the baby to lie on it on his stomach, and offering him food if near the time for nursing, or, if not, a little warmed water, he will in the great majority of cases, quiet down, and perhaps go to sleep. Be sure that no one but the nurse is in the room with him. It is quiet he wants, not company, especially of nervous lookers-on. In regard to medicines, it is advisable to give *Chamomilla* pellets, especially if the baby seems really cross and irritable, demanding constant carrying about. Give two pellets every few minutes for a few doses. This may have to be followed by *Coffea*, which often relieves the sleeplessness and excitement of the little patient. In hot weather it is most likely that the child is thirsty or encumbered by too much clothing. Don't feed the baby every time it cries. Give it water; have it boiled and cooled and kept in a bottle. In very hot weather let the child lie almost naked on his bed, protected by mosquito netting to keep flies and gnats away, for these carry disease, besides causing great discomfort.

Résumé. Remember the following essentials for baby's comfort: Every new-born child should have the benefit of clean, dry, warm, soft and loose cloth-

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and that *a period of rest should intervene.* Usually, however, the following order is observed: The *two lower incisors* or front teeth appear sometime between the sixth to the eighth month. A period of rest of three to six weeks follows, when another group appears, within one or two weeks *the four upper incisors.* Now comes another pause of one and a half to three months, when the *first molars* show themselves; thus about the eleventh to the fourteenth month; again a pause of two to four months—say when the child is about a year and a half old—the *canine,* the so-called *eye and stomach teeth,* appear. Usually about the completion of the second year, or later, the *second molars* appear. But there is a wide difference in different children, depending on the constitution, hygienic surroundings, nutrition, etc. Occasionally a tooth may appear soon after birth, or not at all for a whole year, and in either case the child be perfectly healthy.

Premature dentition is more apt to be attended by constitutional disturbances, precocity as a rule being an evidence of weakness rather than strength.

Retarded dentition is met with always in rickety children; here the first incisors may not appear before the end of the first year, and the whole process may extend into the third year. Where the eruption of the teeth is delayed in children of comparatively sound constitution, the process after it is once begun is rapidly completed and causes but little disturbance. The cause of rickets is improper nourishment, such as poor or insufficient breast milk,

due to too late nursing, too early weaning, and consequent use of food beyond the baby's digestive power, particularly starchy food. Any kind of improper food may produce the result. In late teething look to the nourishment first of all. Even if the child seems plump and bright there is probably room for improvement in the child's nutrition. Very often such children are kept on breast milk, which is not up to the mark, and only after supplementing it with some other food, will the development of the teeth progress.

Some Symptoms Indicative of Teething. In healthy children sometimes there is no noticeable disturbance of any kind, but usually observant mothers and nurses do notice some change in the child's demeanor and physical state. It has been popularly held that *drooling,* and increased flow of saliva, is always indicative of the beginning of the process of teething; yet it is not necessarily so. Drooling is due to changes in the development of the salivary glands, which take place about the fourth month, and hence frequently coincides or precedes the evolution of the teeth. There may be heat and swelling of the gums, thirst, hence the advisability of frequently offering sips of water, which alone will often quiet the restlessness and fretfulness so generally met with at this time. The baby shows constant desire to thrust things into the mouth; biting seems to relieve the itching and irritated gums. The most common complications arise

in derangements of the digestive tract, skin and nervous system. With the advancing tooth we find usually some feverishness, which reduces the digestive power, so that the ordinary diet may become difficult to digest, and hence irritate the bowels, giving rise to diarrhœa usually, although sometimes to constipation. Now, the diarrhœa *due to dentition,* if not severe or weakening, is not to be checked too suddenly. It is rather beneficial. But if really due, *as it frequently is,* to improper diet, summer heat and sudden chilling, it must be attended to and watched carefully.

Constipation when obstinate in teething children is apt to give rise to tendency of blood to the head, which would increase the nervous disturbances of the child, such as restlessness, sleeplessness, fever, etc.

Skin troubles during dentition are common. Various forms of "tooth rash" are met with. Eczema, hives, etc., may appear to be aggravated at this time. If there is any hereditary tendency to these affections, they are sure to appear now, but whether entirely due to teething or dependent as well on the general congestion of all the parts of the head, which is due to the great development of the skull and brain at this time, it is difficult to say. These skin troubles must not be suppressed or healed too rapidly by the use of external means, such as strong salves, lotions, etc.

The Nervous Disturbances are most marked. During this time the whole system is in a sensitive and irritable condition, so that even trifling causes excite a train of acute and serious symptoms. Therefore a cold, improper diet, overfeeding, etc., are more apt to produce trouble at this time. The child is more fretful and restless than ordinarily, cries more. It will cry out at times; sleep is apt to be disturbed and restless; there may be twitchings of various muscles. The most alarming but also rare condition met with is that of convulsions. They are said to occur most frequently with eye teeth and molars, and are usually met with in children that are hereditarily inclined thereto, so that any error in diet, the approach of an acute disease, produces the terrible symptoms. The weaker and more excitable a child is the more decided is the tendency to convulsions. A dry cough is often met with that seems due to teething, since we cannot discover any other cause; also, a peculiar feebleness shown in the easy fatigue and the timid walk after the child has already learned to walk well. Dentition may cause earache and other reflex nervous disturbances.

Again, teething may lengthen the course of any acute disease, or it may aggravate the attack on account of this nervous hyper-sensitiveness.

These morbid conditions need not be due to dentition directly, but they are met with to a greater or less extent at this time, because this is the period for many important changes in the development of the infantile organism, apt to unsettle its equili-

brium. Thus the brain is growing more rapidly than at any other time, the digestive apparatus and the bony structure are undergoing changes and rapid development.

Treatment. Do not fall into the error of neglecting any condition by the excuse that the child is teething. That very fact ought to make you more careful, and try to rectify any untoward symptom that may arise. A teething child should have more than ordinary hygienic care. To promote the normal eruption of the teeth, proper clothing, suitable food, abundant sleep, fresh air and sunshine, judicious ventilation of the nursery, cleanliness of both child and *nurse,* are all necessary. Avoid draughts, patent medicines, sleeping drops, paregoric, etc. Remember that, especially at this time, the exciting cause of sudden and serious illness is anything which may unduly increase the circulation, such as overfeeding or underfeeding, improper diet, sudden chills, etc. If your baby is restless at night, and cries out and twitches, and yet seems so bright in the day time, see to it that you are not tiring him too much by injudiciously pushing him forward. You know he is so cunning and quick to learn, and seconds all your efforts so readily that you like to show him off, and you repeat this much more frequently than is good for him. The little brain that has so much to learn in this world, every moment of which during his waking hours demands attention, gets exhausted, and these irritable symp-

toms at night may be only the reaction of the day's work, the result of an over-tired nervous system. Lancing the gums in strong, robust babes often gives immediate relief to a host of disagreeable symptoms, and always permit your physician to do that simple operation if he thinks best. But I have always been able to avoid it by the judicious use of homœopathic remedies for any untoward symptoms.

Every mother who has children to raise should seek the timely counsel and advice of her physician in order to *preserve the health* of her little charges and further their best development. Do not wait until sickness has invaded the little one's body—interest your physician sufficiently to aid you in *preventing* this as much as possible, and with his help try to surround your children with the best attainable conditions for their soundness of body, for only then can you expect to rejoice in their possession of soundness of mind.

Remedies. Homœopathy possesses simple and harmless remedies that will greatly facilitate this process and ward off dangerous symptoms. As a general remedy to act constitutionally, a preparation of *Calc. phos. 3x* is advisable. Especially indicated if the teeth are slow in erupting, the child is in poor condition; has exhausting diarrhœa, etc. A powder may be given in the milk three times daily, or one tablet put on the tongue.

Coffea subdues the irritation that generally accompanies dentition in excitable and sleepless children.

Chamomilla for cross, irritable children, must be carried all the time; diarrhœa, flushed face, constant crying; one cheek red, the other pale.

Terebinthina. Uncertain tempered children, wakeful at night, screaming as if frightened; staring look; twitching; urine scanty or suppressed; convulsions.

Kreosotum. This remedy is excellent when the gums look dark and the teeth decay almost immediately after appearing. Child is in poor condition.

Of the selected remedy, three pellets may be given every hour or oftener, but not so frequently when child begins to improve.

GROWTH, DEVELOPMENT AND HYGIENE.

Premature Children, if born before the seventh month, rarely survive. The principal treatment consists in supplying warmth, oiling skin, and to swathe the infant in warm cotton and place in a warm place. Surround with hot-water bottles, maintain the temperature 98° to 100° F. Do not bathe, as they are too easily chilled. Anoint with oil, and later if bathed at all let it be with the addition of some alcohol and temperature 110°. If

too weak to nurse, a few drops of warm milk or hot water and whiskey, one to five, one teaspoonful every hour, ought to be given. This will keep up the bodily warmth until the milk can create strength.

If too weak to suck, give food from nipple shield, drop by drop, if necessary. Remember, *warmth* and *stimulants* are the prime essentials. You must maintain (1) the bodily heat, and (2) nourish the child. The effect of cold upon these delicate things is most serious, and growth and life depend almost solely upon maintaining the bodily temperature.

Infancy comprises the first seven or eight months of life, the time during which the infant is nursed at the breast and before the eruption of the milk teeth. Growth at this period is extremely rapid, the weight more than doubling itself during the first six months, throwing much work on the digestive organs, and it is here where most of the troubles during this period are found. During this time the infant ought to sleep most of the time when he is not feeding.

Childhood is the period commencing with the first dentition and ending with the commencement of the second, at the sixth or seventh year. Growth continues active and disorders of digestion and assimilation quickly lead to serious mischief. The food at this period should be simple, but nourishing and abundant. The period from 7 to 9 years of age is

one in which fatigue occurs very readily and damage to the heart likely to be produced. School-children previously bright, when they now show signs of fatigue and lack of interest, may need special care on account of the inefficient heart action.

Youth commences at the second dentition and ends at puberty, about the fourteenth year. During this time the milk teeth are replaced by the permanent set, the bones become more solid and the muscles better developed, while the brain is most active, memory exceedingly retentive. Now nervous troubles are apt to show themselves, chorea and chronic catarrhal conditions, and ill effects of too rigid adherence to school hours and study. Irritation of the sexual organs, induced or caused by other troubles, now become a source of ill health or faulty development. While this is true, we need not attribute every wrong physical and mental state, to trouble here.

Growth is not the steady, uniform process generally believed to be. There are fits and starts of acute growth with periods of comparative rest. This is true of all nature's processes. On this account the child is rendered for a time practically an invalid, unwilling to play or study; wants to lie quiet and do nothing, even shuns his wonted games and amusements. Bye and bye, active interest and energy return with the withdrawal of the blood from the tissues whose spell of growth is completed.

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There are no tears for the first three months. The new born and the dying do not weep. The color of the eyes of all babies is bluish. It changes to the permanent color in about six to eight weeks.

Body Weight. The average weight is from six and a half to seven and a half pounds. For first few days there is a loss of four to seven ounces, then a regular gain. Growth during the first six months is very rapid, doubling its weight in six months and trebling it during first year. Thus, if an infant weighs seven pounds at birth, it ought to weigh about twenty pounds at the end of a year. After this it is much slower, doubling it again at the end of the sixth year. But, remember, that gain in weight may result from storage of fat and water. True growth consists in an increase of tissue, not in laying on of fat. The fat, anæmic, condensed-milk baby is an illustration of the fallacy of judging the value of the food by the gain in weight.

Length. Average nineteen inches, which is doubled by the end of the fourth year. Loss of weight is sometimes the only apparent sign that the baby is not thriving. It is well, therefore, to weigh the baby every week or two, but not daily. Some gain is essential to health and normal development; a cessation of gain is indicative of trouble. Often even a slight illness will retard the growth and put a stop to all gain in weight. A healthy baby ought to gain *at least* four ounces weekly during the first

month or two, and, as a general rule, during the first four months the baby gains about half a pound per week; then gradually falls off to one-half, and less, of that rate. If the regular gain in weight is not maintained, look to the food and assimilation, if there are no signs of sickness present. Probably it is insufficient or improperly prepared.

Respiration. In newly born about 44 per minute; during early months, 35 to 40; end of first year, 28; two to four years, 25; in older children, about 20. During first three years the type of respiration is abdominal, the diaphragm being the chief muscle used and the ribs moving but little. During sleep respiration is less frequent. The rythm of respiration is easily disturbed, and in young infants regular breathing can only be observed during sleep. Before the second year, when regularity of respiration is established, even marked irregularity may have no significance.

Pulse. The pulse can only be taken correctly during baby's sleep. It is very easily affected by any disturbance. 130 to 133 at birth, diminished during sleep 10 to 20 beats; frequently irregular and easily influenced by any excitement. The number of average pulse beats per minute at six months to one year is about 120; at two to four years, 110; at six years, about 100; at eight to fourteen years, about 88. Sleep produces a decided fall in the number of the pulse beats.

Temperature in babies, in order to be taken accurately, should be taken in the rectum, the thermometer being oiled before it is inserted, and carefully watched lest any sudden movement of the child break it and the mercury and fine glass enter the rectum. The baby should be placed on its left side in the nurse's lap. But do not forever take baby's temperature; indeed, with nervous households, I question the utility of a thermometer in the nursery. It must be remembered that the temperature which is normal between 98½° and 99° may suddenly go up to 103° and more, simply because the child is a little constipated. *Continuous* high temperature, even if not over 100°, of course, is to be feared and needs the physician's care.

The Head is large as compared to the rest of the body. It is often out of shape after tedious and especially instrumental labors, but this soon rectifies itself.

Fontanelles. At the back of the head and just behind the forehead are two spots not fully bridged over by bone, and only skin and thin membrane cover the brain, which can be seen pulsating through them. The anterior is the larger and measures from one-half to two inches in diameter soon after birth. It should not be depressed or bulge out.

The smaller fontanelle closes soon after birth, but the anterior remains open much longer and may remain so until the end of the second year.

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Hearing. The infant is deaf for a few days after birth. At end of two months will turn head to sounds. Remember, he is very sensitive to noise, very loud sounds causing great fright, even spasms.

Touch is not highly developed in birth except in lips and tongue. A young infant will refuse to take a bottle because the milk is only a few degrees too cold or too warm. The right temperature of the food is, therefore, an important matter.

Taste is highly developed. A normal infant can distinguish between sweet, sour and bitter; sweet exciting sucking movements, the other only grimaces.

Smell is developed latest.

Speech. Great variation with reference to time of development is the rule. Girls talk earlier than boys. At the end of the first year, often before, "Papa" and "Mamma"; end of the second year, words can be put together in short sentences. Names of persons first, then names of objects. Next verbs, then adjectives. Last of all, personal pronouns. If the child makes no attempt to speak at the end of two years we are justified in fearing some mental defect, although I have seen cases where the delay was longer and the child was otherwise normal. Here again a homœopathic physician should be consulted, for he has remedies that act upon the speech center in the brain.

Urine. The normal urine of the first few days is apt to be scanty and often has a brick-dust sediment. This is of no special consequence and represents the waste product of intra-uterine life which was kept dammed back in the kidneys until such time when after birth the discharge of urine shall wash it out. Its presence is a strong indication *for thorough cleansing of the napkin,* for these crystals are irritating to baby's skin. If at all persistent a few doses of *Lycopodium* will cure. There is great variation in the frequency of urinating, depending on the temperature and moisture of the surrounding air. The urine should not stain the napkin.

The Evacuations. The daily number of evacuations varies. For the first six weeks there should be three or four every twenty-four hours. But my experience points to rather fewer, one or two only. The passages for the first two or three days consist of a thick, sticky, blackish, odorless substance called *Meconium.*

The feces should be bright yellow and consistence of ointment. This is true when the milk is well adapted to the child's digestion. Any marked deviation from this character is abnormal and ought to be brought to the attention of the physician, who can often select the proper remedy, both dietetic and medicinal, from the appearance and physical properties of the evacuations.

Training Proper Control of Rectum and Bladder. It is surprising what can be done in this direction. Even at three months infants can be put on chamber or "held out." Habit is the largest factor in preventing future trouble. The infant must be put upon the chamber soon after its feeding. Napkins ought to be dispensed with after the first year, often before. By the tenth month healthy infants should go from 10 P. M. until morning without emptying the bladder. Proper training, correct diet, and hygienic surroundings, with homœopathic remedies, will bring it about.

Hygiene of Nervous System. The brain grows more during the first two years than all the rest of life. Normal development of brain requires quiet, rest, peaceful surroundings, freedom from everything causing excitement or undue stimulation. Do not permit too much playing in evening when the fond papa comes home.

The intense excitability of the nervous system is one of the vital characteristics of early childhood. In robust children we constantly find the whole system suffering violently from sympathetic derangement set up by some trifling disturbance. A little indigestible food, or overfeeding, or a cold, will produce a burning fever, delirium or convulsions. But when nutrition is impaired, and the child is below par, the most serious diseases may give no signs of their presence. Therefore be specially alert in the case of weak, puny, chronically

ill children, and guard them from invasion of acute diseases.

Airing. As a rule, the infant may be taken out at the end of a month. In warm weather, earlier or when temperature is above 60° F. Protect head from wind *and eyes from sun.* Many nurse-girls are careless about this. At first keep out only a quarter hour, gradually two to three hours, until after a few months there is no reason why a healthy child should not be out every day more or less.

Sleep. Regularity in the hour for sleep, both for the day nap and night, is most essential. Do not give up the noonday sleep too soon. Many a child is cranky and irritable and *sleepless* at night because it does not have enough sleep during the day. Do not rock the baby to sleep, or walk with it, or give any sort of soothing syrup. Give it the comfort of a sweet lullaby, however, which in itself is the best hypnotic. While at first the baby ought to sleep most of the time, after a couple of months he will lie awake for an hour at a time and be happy. At one year he should have fifteen or sixteen hours' sleep. At two or three, about twelve to fourteen hours, and all through childhood from ten to twelve hours. Never wake a sleeping child.

The baby *should* go from six to eight hours at night without nursing. This is theoretically correct, but, practically, if we get two rests of four hours each we shall do remarkably well, although I

have known children to sleep all night through from the first. Sleep should be quiet and without any movement except that of breathing. Jerking, twitching and grinding of teeth are all signs of unhealthy sleep, and the cause must be discovered and corrected. Older children who do not sleep during the day may, if nervous and poor in health, require an hour's complete rest reclining on an arm chair or sofa with a story book. The best time is after eating in the middle of the day.

Exercise. Nothing is more conducive to substantial growth and vigor than an outing in the fresh air and warm sunshine of a dry, mild day. Hot as well as freezing weather is unfavorable for infant exercise, but between these extremes, if the wind is not blowing and the air is not damp, it can be taken out without harm. Suggestions along this line would seem to be entirely superfluous, so far as California mothers are concerned. Our climatic conditions are so exceptionally favorable to child-life that the young folks among us may do a large part of their living and growing outdoors amid sweet air and beneath fair skies.

GENERAL THERAPEUTIC MEASURES.

Rest is the greatest of all mechanical aids in many troubles of infancy and childhood. Natural rest, regular rest, enforced rest, rest for proper growth and development, rest for prevention and

relief of pain; in many nervous affections, fidgety and restless states, rest is the chief remedy.

Heat is probably the most widely useful and important of all aids in the treatment of many forms of disease. We make use of *dry heat* in the hot-water bags, electric pads, or heated salt or sand bags, or Japanese stove, or, better still, *moist heat* in the shape of hot fomentations, compresses, etc. The latter especially is invaluable in throat affections, bronchitis, colic, restlessness, etc. Remember that the *child's skin is very sensitive* and cannot bear the same degree of heat that the adult can.

Cold Compresses, or ice bags, are sometimes of benefit in inflammations, especially about the head, sore throat, etc. A more general application of cold consists in the cold bath or pack; but these ought only to be given under the advice of a physician.

Packs may be hot, cold or stimulating, like mustard.

The *Hot Pack* is best applied by wringing out a light blanket in hot water with a dry one on the outside. Useful in the suppression of urine. The head should be sponged with cold water while the pack is used.

Cold Pack. Strip the child and lay on a blanket. Envelop entire trunk in small sheet wrung from

water at a temperature of 100° F. Upon the outside of this ice may be rubbed over the entire trunk. The rubbing of ice may be repeated in from five to thirty minutes, after which roll in blanket. The head should be sponged with cold water, and, if necessary, heat applied to feet. Continue pack from one to several hours.

The Cold Bath. Put the child into the bath at 100° F. and gradually reduce temperature. Rub body well while in bath; dry quickly and roll in warm blanket. Bath should last from five to twenty-five minutes.

Hot Baths are often of great use in spasmodic affections, collapsed conditions and in eruptive diseases where the rash does not come out well. It should have a temperature of 100° F.

Bran Bath. Put a few handsful of bran in a muslin bag and squeeze it out into the bath water; it will make it milky and bland, and prove most grateful in all irritated conditions of the skin, eczema, hives, and other itching conditions.

Salt Water Bath. Common salt, or sea salt, about two ounces to a gallon, is an excellent tonic bath in cases of delibity, rickets, tuberculosis, and for the tendency to cold and catarrhal affections. The whole body should be rubbed after every bath with a Turkish towel or rough bath gloves to excite healthy action of the skin.

Malt Baths. A most useful tonic measure for weak children and such as are inclined to scrofula and do not gain strength rapidly after illness. A few pounds of barley malt should be boiled with a couple of gallons of water for an hour and allowed to stand on a warm stove for another hour. This malt water is then added to the lukewarm water of the bath. Such daily malt baths continued for weeks will greatly improve the general health of children. They are much in vogue in Germany and health resorts.

Milk Bath. Milk more or less diluted with water makes a most soothing application in very sensitive excoriating skin troubles. I sometimes dilute the milk with Hamamelis Extract with good effect.

Milk Baths as a Remedy. Since it has become known that milk in a bucket sitting in a sick-room will absorb germs, a recent writer has applied the idea in the treatment of small-pox, fevers, diphtheria, etc., with marked success. The patient is laid on a mattress covered with blankets. He is then packed in a sheet saturated with milk covering the entire body, in which condition he remains an hour. A warm water bath is then given, after which the surface is dried and the patient is put to bed.

Sponging. The readiest means of reducing temperature. The child should be stripped and laid upon a blanket or sheet with a waterproof beneath; a large sponge should be used, and the face, trunk

and extremities sponged for five or ten minutes. The water used should be cold, but with nervous patients it is well to begin with tepid water. If the child is feeble, put a hot-water bottle to its feet during the sponging. The action of cold sponging is temporary only, but useful and safe.

When a child evidently dreads the water, an excellent plan is to cover the bath with a blanket and place the child thereon and gently lower it into the water. By this simple plan much screaming, terror and unnecessary exhaustion are avoided. Remember that the child's skin is much more sensitive than that of the adult, it is easily burnt and quickly susceptible to cold.

Oil Inunction is a most useful measure in all forms of wasting and faulty nutrition. Warm sweet oil should be rubbed all over, but especially on the abdomen, thighs, soles of feet and arm pits. Massage with oil is of great value in chronic constipation. Have the oil warm, and be sure that the hand is so. Cocoa butter is an equally good oily application, and to some children more agreeable.

Counter-irritants. *Mustard Paste,* most satisfactory of producing quick counter-irritation over a large surface:

℞. 1 part powdered mustard,
2 parts wheat flour.

Mix with lukewarm water and spread between two layers of muslin. This should be removed as soon

as thorough redness of the skin is produced—in five to eight minutes. May be repeated in three hours. Ready-made mustard plasters may be obtained in all drug-stores.

Mustard Pack. Strip child and lay on blanket. Wrap around it a sheet saturated in mustard water.

℞. 1 tablespoonful mustard to 1 quart tepid water.

Roll up in blanket ten to fifteen minutes. Useful in collapse or great prostration, in spasms, in cerebral and pulmonary congestion, and to bring out tardy eruptions.

The benefits of mustard plasters are unquestioned. Wherever there is a cold surface, a mustard plaster on arms, legs or abdomen *for twenty minutes* (not longer) will be excellent. For sleeplessness, colds on chest, asthma, spasms, pains, etc., they act beneficially.

How to Fix a Mustard Plaster. Soak in warm water for two minutes and apply. The mustard side goes next to the skin. If skin is sensitive, a thin piece of wet cloth may be placed between it and the skin. On a sensitive skin, five minutes will produce a bright red patch. The plaster may then be removed and a fresh one applied in another spot if necessary. If the red spot burns too long, the use of full strength grain alcohol will stop it.

Turpentine Stupe is made by wringing a piece of flannel out of water as hot as can be borne. Upon

this sprinkle ten to fifteen drops of spirits of turpentine. This is applied to body and covered with oil silk or dry flannel. It is chiefly used in abdominal pains and inflammations, but must be watched in infancy so as not to produce blistering.

Mustard Bath. Four to five tablespoonfuls powdered mustard should be mixed for a few minutes with one gallon tepid water. Add four to five gallons hot water 100°. Brings blood to surface in collapse, shock, heart failure or sudden congestion to brain or lungs. Length of bath, ten minutes. Repeat, if necessary, in an hour.

Emetics. When emetics are necessary, in cases of poisoning, or presence of indigestible substance, the following given every ten to fifteen minutes, are serviceable, viz.: One teaspoonful syrup of ipecac; or one teaspoonful of warm water and mustard, in the proportion of one tumbler of water to one teaspoonful of mustard.

Stimulants. I do not believe in giving stimulants of any kind to children, but there are some low forms of disease, collapsed conditions, where they may be indicated and prove of service. It is necessary to know just how to administer them in order to avoid doing mischief.

Method of Administering. This is very important. Brandy and whisky are preferable as a rule. For infants under one year, brandy should be diluted

with eight parts water. Best way is to determine the amount to be given, then mix with water, and then administer in small, frequent doses. Quantity for one-year-old in twenty-four hours, one-half ounce. Brandy or whisky may be increased to one and one-half, rarely two ounces. In children four years old, double the amount may be employed. Larger quantities are of doubtful advantage and may do more harm than good. But remember that *stimulants should never be given to children without the advice of a physician.*

Tonics. Cod-liver oil, especially in convalescence after acute diseases of the respiratory organs; also in anæmia and in delicate children. Do not give at any time when tongue is coated, the digestion poor, the stomach easily disturbed. Pure oil to be preferred. Ten to twenty drops three times a day is better than large quantities. Hydrolene is an excellent preparation if the pure oil cannot be taken.

Cotifo. A constitutional tissue food, admirably adapted to the need of the growing organism and weak and backward children. It is a biochemical preparation containing molecules of Lime, Iron, Potash, Magnesia and Sodium in the approximate proportions found in the tissues, highly triturated and rendered assimilable by the tissues.

Dose. One tablet for infants, two tablets for children; may be taken with the regular food three

times a day or they may be taken every three hours between meals. In acute forms of malnutrition, weakness, exhaustion, a few tablets may be prescribed every two hours, dissolved in a cup of hot water, milk, grape juice or broth.

HOMŒOPATHY IN DISEASES OF CHILDREN.

The special adaptation of homœopathy to the treatment of diseases in children has been recognized since its first introduction. It ought to be universally adopted because of its wonderful success in this field, for in the treatment of children's diseases homœopathy has achieved its greatest victories. It has cured many cases pronounced incurable by the old school; it converts painful, incurable disorders into conditions of comparative comfort, lessens suffering and distress, and is the only medical treatment that can change the constitution and inherited defects.

It is a well-established fact that children brought up under homœopathic treatment enjoy better health, are less liable to have epidemic diseases, recover more quickly when sick, have no ill after-effects, and are in every way more vigorous and able to throw off disease germs whenever exposed.

Homœopathic treatment does away with the regular use of purgatives, injections and suppositories and all forms of drugging.

Homœopathic remedies are harmless, tasteless and efficient.

Homœopathic treatment saves time, money, strength and eradicates permanently and thoroughly chronic and hereditary disease tendencies.

SOME SPECIAL INDICATIONS FOR THE USE OF HOMŒOPATHIC REMEDIES FOR CHILDREN.

Since it is impossible to ascertain the *subjective* symptoms (those of the patient's own feelings and sensations) of small children accurately, we must make use of the *objective* symptoms, that is, such as can be perceived by the senses of the prescriber, such as the appearance, expression of the child, the pulse and temperature, etc. I will give some of the principal objective symptoms of remedies, which will enable every one to prescribe the right remedy in the various diseases to which children are subject.

ACONITE.

Of all remedies in the materia medica, *Aconite* has done more to establish homœopathy among the people than any other. Prepared accurately, according to homœopathic principles, we convert a poisonous drug into a harmless preparation, capable of doing wonderful, beneficent work in the cure of many forms of acute disease. *Aconite,* in the homœ-

opathist's hands, more than anything else, has done away with the lancet that ruled supreme when homœopathy was first introduced. Aconite, again, is capable of displacing most of the modern drugs so freely given by the old school for fever and pain. In this catagory, the various coal-tar products, like *Aspirin, Antikamnia, Phenacetin,* etc., are frightfully abused. Especially is this true in the treatment of diseases of children, where we should ever be on our guard against druging of all kinds. But even aconite can be abused by giving it in too strong a dose. The preparations found in the drug stores are all of them poisonous and must never be employed. The homœopathic preparations alone, never stronger than the "third attenuation" either in pellets, disks or liquid, should ever be given. If these are used, and the remedy is chosen according to the indications below, a certain and speedy response will invariably follow. *Aconite,* thus given, is one of the certainties of medical practice and one of the greatest blessings to mankind.

Aconite is the first remedy for fever.

Much restlessness and tossing about, mental excitement and feverish symptoms shown by the hot, dry skin, quick pulse and rapid respiration are the sure indications for the use of aconite in any diseased condition. This state is usually found in the beginning of all acute diseases, such as eruptive diseases, bronchitis, influenza, pneumonia, etc., and it is here when aconite comes into use most helpful-

[illegible] cold.
[illegible] doors, [illegible] was up
[illegible] A cold manifests
[illegible] some on sud-
[illegible] sound
[illegible] dark-
[illegible] symptoms.
[illegible]

rapidly into croup, bronchitis and pneumonia, and other serious acute diseases, which, under the benign influence of carefully chosen homœopathic remedies, remain simple, passing ill turns, from which the little patient makes a quick and perfect recovery.

ANTIMONIUM CRUDUM.

Gastric disturbances, with great mental irritability and fretfulness, often require this remedy. The child is cross, sulky, cannot bear to be touched or looked at, will not speak; seems worse in the heat of the sun and dislikes cold bathing. Tendency to hives, pimples, pustules, warts, corns. Desires sour things—pickles.

Objective Symptoms. Eyes inflammed, agglutinated, *canthi raw and fissured;* nostrils chapped, sore, cracked, scurfy; pimples on face; yellow crusted eruptions on cheeks and chin; cracks in corners of mouth, canker sores; *tongue coated thick white,* as if white-washed. Diarrhœa, *hard lumps mixed with watery discharge* or undigested. Belching and vomiting renewed after taking food or drink. The babe vomits sour curdled milk as soon as it takes the bottle.

Dose. One tablet or a few pellets three times a day.

ARSENICUM.

Whenever this medicine is indicated, the following symptoms will be present: The little patient does not want to be spoken to, and seems to be re-

pain there. Best general remedy for *headaches, sore throats and dry cough.* As a local remedy *Belladonna* in the form of *Belladonna cerate* is one of the best applications for boils, carbuncles, swollen glands and swellings generally. It will ease the pain and reduce the inflammation and swelling.

Dose. A few pellets every hour.

BRYONIA.

This medicine is to be thought of in *colds that invade the chest.* The child does not want to be moved—any motion seems to increase his suffering —must be kept still in order to be appeased. It is constipated, stools are large, hard and dry. Lips dry, parched and cracked; the child does not like to take hold of the breast, but when once its mouth is moistened it draws well. Much thirst, diarrhœa from hot weather. Cough from cold on chest; pains anywhere that are worse from any motion.

Dose. A few pellets every hour in colds, otherwise every three hours.

CALCAREA

is the great remedy for fat, flabby children. There is much perspiration, especially around the head, so as to wet the pillow. Bloated abdomen, white, chalk-like stools; child craves eggs, glands are swollen, slow and difficult dentition. The gums are

pale and shiny when the tooth is a long time coming through. The child's *feet are cold and damp* and feel as if it had a cold, damp stocking on. There is great sensitiveness to cold and easily catching cold. Limp, sweaty hands. Tendency to hives. Loose-jointed children. Child frequently awakes about 3 A. M., and is then sleepless. Leucorrhœa of little girls.

Dose. Two tablets three times a day.

CHAMOMILLA.

This is the greatest homœopathic remedy for diseases of children. The *Chamomilla* patient is very fretful and wants to be carried about. Is very cross, wants everything but refuses it when offered; child stiffens itself and bends backward, kicks and screams. The child must have motion, which is the only thing that relieves him. *Colic,* greenish diarrhœa, or like chopped eggs. Stools have odor of decayed eggs; one cheek is apt to be red, the other pale. The child seems to be extra sensitive to pain, and is very restless; has redness of cheeks or of one cheek only.

Dose. A few pellets every half hour until relieved.

CINA.

For worms and reflex symptoms due to presence of worms. The child bores at nose or rubs it constantly, starts up from sleep in a dream, is fright-

ened. It is seen to swallow continually, seems very hungry all the time, the urine is milky white, sleep very restless, pain near navel; the child is seldom quiet or good natured, whether sleeping or awake. Does not want to be touched. Grinds the teeth. Convulsive attacks at night. Dry night cough. Itching of the rectum.

Dose. A few pellets three times a day.

COFFEA.

Sleeplessness; the first remedy to be thought of. The child seems very excitable; it seems as if it *could not* sleep. It frets and worries; is not cross, but sleepless. It laughs one moment and cries the next; is feverish for want of sleep, which it cannot obtain. Nervous excitement generally indicates *Coffea.* Spasms that seem to be brought on by excessive laughing or playing. Children who cannot stand any pain at all often find *Coffea* a helpful remedy.

Dose. A few pellets every ten minutes for a few doses.

COLOCYNTHIS.

Much colic, forcing the child to double up with writhing and twisting. Sometimes the pain is relieved by pressing hard upon the abdomen. Noisy emission of flatus. Passages small and frequent, with colic; child has difficulty in voiding urine;

strains much; urine is scanty. Any disease accompanied by spells of colic pain, in which the child curls up double and writhes and cries very hard.

Dose. A few pellets every ten minutes until relieved.

DROSERA.

Whooping-cough. The child is worse after midnight, with high fever, cough in violent spasmodic spells, as if it would suffocate; sometimes bleeding at the nose and mouth. Cough with measles, when it is very hoarse and worse at night.

Dose. A few pellets every two hours.

GELSEMIUM.

Remittent fever; the symptoms are worse at night; the face is dark-red or has a dusky hue; there is a great deal of nervous restlessness; vertigo; the child complains that it is falling; is sensitive to light and sound; is unable to move the limbs in obedience to the will; pulse is soft and flowing; artery easily compressible. Headache as if a band around the head. Child is drowsy. *Gelsemium* is one of the best remedies for colds in warm weather; child is dull and drowsy; older children feel dizzy, and their eyes bother them, cannot keep them open. Sore throat and swollen glands.

Dose. A few pellets every hour.

HEPAR.

The child seems croupy, and the phlegm is loose and it chokes when coughing. If there is a rattling, choking cough, becoming worse particularly in the early morning. Eruptions on skin that spread by new pimples appearing just beyond the main disease, which finally become incorporated with those which came first. In inflamed eyes, when little pimples surround them. Mumps. The child, though plump, has flesh flabby, muscles withered and digestion weak; cannot bear pressure on stomach after eating. Glands are swollen, the child is subject to catarrh from the least draught of cold air.

Dose. Two tablets every two hours.

IPECAC.

Incessant and most violent cough with every breath. This symptom is sometimes frightfully severe in delicate children suffering with measles. Much nausea and vomiting; short, hurried breathing. Useful in diarrhœa; stools are green and fermented; whooping cough—child strangles till blue in the face.

Dose. . A few pellets every two hours.

LYCOPODIUM.

Useful in gravel. The child always cries and screams before passing water, and is relieved im-

[illegible] Red sand is found in the [illegible] good deal of rumbling in the [illegible] there is decided dabbling [illegible] Always worse late in [illegible] abdomen full of wind.

[illegible] times a day.

[illegible]

[illegible] always worse at night. [illegible] this does not relieve [illegible] waiting. Ulcers upon [illegible] heal easily. Glands [illegible] bloody, with [illegible] and legs are [illegible] night. The child [illegible] weather. Sore

[illegible]

[illegible] the child has been [illegible] nothing [illegible] difficult [illegible] not sleep after [illegible] There is much [illegible] cries much [illegible] again, etc. I[illegible] and stimulati[illegible]

food—coffee, etc. For teething children being raised by artificial or mixed feeding. Child is peevish and fretful. Breath very offensive. Cold in the head; through the night the nose is very dry. Spasms from indigestion. Irritable children.

Dose. A few pellets every two hours.

PHOSPHORUS.

Bronchial troubles, when the cough is severe and exhausting. Worse in the evening and during the night. Then the fever is very high. Particularly useful for tall and slender children. Hoarseness that gets worse towards evening. Nervous excitability. Craves cold food. Stools often contain little particles that look like tallow. Longs for cold water, but soon vomits it.

Dose. A few pellets every three hours.

PULSATILLA.

Useful in diarrhœa, when the stools are very changeable—no two alike. Mucus streaked with blood—worse toward evening. *Child is not thirsty,* but seems to be chilly; and yet he is restless, wants to be in the open air. Coryza with thick discharge. Cough is loose. In *measles* it generally suffices. Inflamed eyes, especially when worse toward evening and better in open air.

Dose. A few pellets every two hours.

RHUS.

A good remedy for itching of the skin. There is much restlessness, particularly at night. Eczema, especially when a bright edge of inflammation surrounds every portion of the eruption and there is much itching. Poison oak.

Dose. A few pellets every three hours.

SILICEA.

For scrofulous children. Head is disproportionately large. Child is apt to be obstinate and irritable. The feet smell badly; profuse, sour-smelling perspiration upon the head in the evening; head is large. Whole body is wasted. Bones are diseased. Rachitis. Small pricks or cuts fester. Toe nails grow into the flesh. Appetite lost, averse to mother's milk. Weak ankles.

Dose. Two tablets three times a day.

SULPHUR.

The *Sulphur* child is unduly sensitive to open air and wind. The child frequently awakes from sleep screaming; great voracity; wishes to put into its mouth everything it sees. Its passages excoriate the anus. The child jumps and starts and screams fearfully. It has a tendency to excoriations whenever the skin is folded upon itself. Pimply eruptions. This remedy very often cures the colic and

stomach troubles of infants. The child does not like to be washed. It wakes frequently. Sleeps only in cat naps, and is easily awakened. Seems to have frequent weak and faint spells. Particularly for children of delicate parents. Frequent relapses; the child seems to be doing well, when, without apparent cause, it gets worse. It is worse in early part of the morning. Much itching of the skin, which is unhealthy generally; it has a rough and scaly look. It is dry and harsh. Kicks off bed-clothes. Feet are hot and wants them out. Obstinate, cross, ill-conditioned children. Complains of fatigue every little while; refuses to stand much.

Dose. Two tablets night and morning.

TARTAR EMETIC.

Cough with much rattling of mucus—it seems as if much would be expectorated, but nothing comes up. Much thirst. Nausea and vomiting. Patient is drowsy. Sweat on forehead. Child will not be touched or looked at. Tongue coated. Desire for cooling things.

Dose. Two tablets every two hours.

If it is remembered how necessary the phosphate of lime is to the developing and growing organism, how, indeed, its presence is essential to the *initiation* of growth, supplying the first basis for the new tissues, promoting cell growth, its importance as a constituent of the food becomes evident. This method of administering *Calc. phos.* is of special benefit in weak, scrofulous subjects, where digestive difficulties and bowel irritability result in malnutrition. In older children, after acute diseases, administered in the same way, it proves to be a real tonic. I think there is an increased activity to be obtained at times by giving a constitutional remedy like this *with* the food—it is then that the organism is peculiarly receptive, its whole absorbent and glandular system intensely active, and therefore offering the best conditions for appropriating the remedy.

Later in life we find *Calc. phos.* an excellent remedy at the time of puberty; girls who are anæmic and have much headache, especially on top of the head, are much troubled with acne and flatulent dyspepsia, the distress in the stomach temporarily relieved by eating.

The intestinal symptoms have often been verified. The diarrhœa calling for *Calc. phos.* occurs most frequently during the teething period; the stools are hot, undigested, sputtering, offensive; the child hows a craving for indigestible things — ham, noked meats, etc.; the region around the navel ems very sore.

tiveness and in the whining, fretfulness and sleeplessness of nervous children. Headaches of school children. Very offensive breath may call for this remedy.

KALI SULPH.

In the later stages of catarrhal cough, when there is much loose phlegm, great rattling of mucus in chest, this remedy is to be remembered. Its symptoms are apt to be worse in the heated room. Useful for dandruff and scald head, eczema, nettle-rash, and dry, itching skin.

MAGNESIA PHOSPH.

This is a great remedy for all sorts of pains and spasmodic conditions—colic, etc. All the neuralgic pains cured by this remedy are relieved for a time by heat. The child laments all the time about pain. Spasms with febrile symptoms and in many complaints of teething children. Flatulent colic, little patient is somewhat relieved by rubbing, pressure and warmth. Some forms of spasmodic cough. Good remedy for chorea.

NATRUM MUR.

This is a useful remedy for poor states of nutrition, especially in children living in malarious districts. Young girls at time of puberty when they become chlorotic and anæmic will be benefited by

Natrum mur. They are depressed and have blinding, throbbing headache. The eyes are weak, lids swollen. Often cures running colds with much sneezing and loss of smell and taste. The skin is shiny and oily. Cold sores. Much craving for salty food. Nervous jerking during sleep. Child dreams of robbers. Useful in hives that itch and burn much, also in crusty eruptions on margin of scalp and bends of limbs. Ankles are weak.

NATRUM SULPH.

Is unquestionably a valuable remedy in asthma in children. I have entirely cured by means of this remedy several cases that had always had an attack from any change of weather or gastric disturbance. Almost invariably I found a history of eczema in these cases. Biliousness; slimy, bitter taste.

NATRUM PHOSPH.

Especially useful in digestive troubles of children when there is much activity. Children who vomit sour matter, have sour stools with colicky pains. Babies who vomit a great deal will be benefited by this remedy. Another use is for constipation of infants, where it often works well. Worms, too, are attacked by *Natrum phosph.* by changing the nutritive soil upon which they thrive, and in this way it is a constitutional remedy for worms and accompanying conditions.

Dose and Administration of the Tissue Remedies. Of the selected medicine, give two tablets of the sixth trituration every three or four hours. In more acute forms with fever, give a dose every hour; in painful affections, every half hour.

HOMŒOPATHY AND HEREDITY.

Homœopathy, with its pleasant medication, seems from that fact alone to be especially adapted to the treatment of disease in children, and has been so recognized since its first introduction. But its claims as the only rational medicinal treatment for all forms of disease, both acute and chronic, rest on far more important grounds. Homœopathic treatment does away with all forms of drugging—its simple remedies, in themselves harmless, tasteless, are yet powerful enough to arouse the reactionary powers of the body and enable it to throw off disease. Homœopathy can cure all curable diseases in the quickest and directest manner; it never depletes the system; many diseases pronounced incurable by the old school are cured by this method; many surgical cases are brought within its sphere, and thus the patient is often saved local and surgical treatment. It is a well established fact that children brought up under homœopathic treatment enjoy better health and are less liable to take epidemic diseases, recover more quickly when sick, have no ill after-effects, and are in every way more vigorous and able to throw off disease germs when-

[illegible] most important of all, homoeopathy is the one method that can eradicate from the system certain acquired and hereditary disease tendencies and even by pre-natal medication of the mother insure a healthier progeny than is otherwise possible. These are facts based upon the experience of many acute observers.

It is during the period of fœtal life, which is the natural preparation for the human body, that many transmissible, nervous and mental states may be communicated to the child. At the same time disease prevailing especially in the form of so-called dyscrasia of the mental class of health, may be transmitted to the child. On the other hand, this period of development is also favorable for permanently eradicating a hereditary disease tendency of the mother by a thorough homœopathic remedies of disease tendencies. One of the great blessings of homœopathy and distinctive of it is the opportunity it presents for curative treatment it offers. During the period of intra-uterine life, when [illegible] and hereditary tendencies be[illegible] to homœopathy, the possibility [illegible] treatment by the deep [illegible] medicine treatment had never been [illegible] was demonstrated by homœopathy. There is no more exciting field for the scientific homœopathic physician than just this, to destroy disease at its foundation, and by changing the character of the physical organization, the soil upon

which disease germs find abode and diseases are developed.

If there is any hereditary taint in your family, give the child the benefit of homœopathic treatment through the mother's organism, and much can be accomplished to the lasting benefit of the coming man.

Homœopathy alone can supply certain needful treatment in the care of delicate and weak children whose development is slow and whose growth is stunted. It does this by removing the obstacles within the organism; its deep-acting constitutional remedies rectify inherited or acquired defects and supplement all other measures, such as climatic and dietetic change, exercise, rest, and whatever may be prescribed. Carefully chosen homœopathic remedies do more specific work than those general measures necessary as they are. Homœopathic medicines can be adapted to the individual needs of each patient, to whatever underlying taint or hereditary weakness may be present or active. It is the presence of these constitutional taints that offer a favorable ground for many forms of chronic disease, that allow acute diseases to assume a severe type and run an abnormal course. They interfere with healthy, happy childhood and normal development.

Every practitioner of experience sooner or later learns that in order to get a true understanding of the course of diseases in children the bodily organization of our little patients, as modified more or less by heredity, must be the special object of our

therapeutic measures. This is the ground that de-
[illegible] course of acute diseases with
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[illegible] DISEASES IN

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by greater liability to be affected by slight causes. Remember the equally important fact that the same child, *depressed by chronic disease,* will have its nervous sensibility *abnormally lowered,* and hence *now* really serious trouble produce but *slight* symptoms; a serious secondary or intercurrent malady may excite little notice and take fatal possession before we are really aware of it.

The same vital activity renders the course of disease more rapid, the attack more sudden, and shows severer symptoms. Again the different organs and functions are linked together more closely and a close sympathy is established, so that disease in any organ will cause a general commotion throughout the body, and the consequent importance of *reflex symptoms* where the most prominent symptom may emanate from some *distant organ.*

It is for these reasons that a correct diagnosis of *apparently* uncomplicated conditions can be given only by the physician to whose judgment every mother should appeal.

The chief factors in nursing sick children are *quiet, cleanliness* and *water.*

Quiet is very essential. Put the sick child to bed. Do not permit visits. Not too much light. Be careful about bed covering. Often it is too heavy and too much, or too little when child sits up, etc. Well children should not be in the same room at any time.

Cleanliness. Sponging all over once or twice a day, and local washing after evacuations is important.

Bed must be clean and comfortable. Sheets should be changed often; warmed before they are used. See that there are no wrinkles or crumbs or playthings in the bed that would otherwise interfere with the child's comfort.

DISEASES AND THEIR HOMŒOPATHIC TREATMENT.

ABSCESS

Is a circumscribed cavity containing pus. It is a consequence of inflammation of tissues following an injury, such as a blow or presence of a foreign body. The chief symptoms are swelling, heat, redness, and throbbing pain, frequently with shivering or rigors.

Treatment. Application of heat, poultices of flaxseed or linseed. When the abscess has opened, the wound should be bathed with warm *Aqueous Calendula,* one part to five, and afterwards a cloth with some *Calendula cerate* be applied. Internally, give *Belladonna* every hour, one disk, to be followed by *Hepar,* same dose. For abscesses that are slow to heal, give *Silica,* one tablet every three hours.

ACNE.

An eruption of pimples, usually on the face, and especially occurring at the time of puberty. It is apt to be a very obstinate affection and needs careful local and constitutional treatment.

Treatment. Look to diet, avoid fat and rich food. Proper attention to bathing, exercise, and the bowels is necessary. If there is any menstrual disorder, see to that.

Natrum mur.; a dose night and morning should be given to persons with bad, earthy complexion, who are bloodless and inclined to be constipated and generally depressed in body and mind.

Cimicifuga for facial blemishes in young girls. Locally use *Resorein cream* after bathing parts with hot water at night on retiring.

ADENOIDS.

A collection of glandular material in the uppermost part of the pharynx similar to the tonsils. Sometimes called third tonsil. It fills up the space that ought to be free for proper breathing, and so interferes greatly with the proper development of the child. Apt to appear about the time when the first dentition is completed. It naturally subsides about the time of puberty. Unfortunately remedies but partially relieve, and operation is the one thing that will radically cure; but medicinal treatment must at the same time be given to prevent recurrence, for this is quite frequent. *Make the child breathe through the nose,* and teach him early the use of the pocket handkerchief. Encourage deep breathing exercises with mouth closed. In all cases of mouth breathing and nasal obstruction, a special-

the milk. Some foods composed of wheat and other cereals must be added to the milk. Avoid the excessive use of iron. In the form usually given it is practically worthless. Prepared homœopathically, it is assimilated by the organism. For this purpose, give *Ferrum phosph.* 2x trit, three times a day; a few tablets. Good, nourishing food, warm clothing and outdoor exercise are of much benefit. Eggs should form much of the diet. Avoid hot, close rooms, ill ventilation, tight clothing. Hysteria is often combined with anæmia.

Calcar. phosph. 3x, a powder three times a day. This remedy acts by supplying new blood cells. Waxy appearance of skin, headache, ringing in ears, vertigo, cold extremities, tendency to profuse menstruation.

Ferrum. Easily flushing face, otherwise patient is pale. Throbbing headache, vomiting food. A few tablets of the second trituration three times daily. For older children *Hensel's tonicum* is an excellent preparation.

ANKLES WEAK AND PAINFUL.

Children often complain of this condition. The best treatment to strengthen the joints is to bathe them with *Pinus tincture* night and morning. At the same time give *Calcar. phosph.* internally, two tablets three times daily for one week, then *Natrum mur.* for one week.

APPETITE, LOSS OF.

This is usually a symptom of some general disorder, but if the child seems otherwise fairly well, look to the bowels, give plenty of water and fruit as part of his diet, and tempt him with a little unfermented grape juice occasionally. At the same time give *China disks,* one every two hours until an improvement shows itself. Sometimes there is a *depraved* appetite in growing children, for which remedies are especially indicated. Among these *Calcarea* has craving for chalk, coal and other similar things; *Nat. mur.* for very salty things; *Hepar* for sour and pungent and highly flavored things.

Again, the appetite is greatly increased, and yet the little patient does not gain in weight, or even loses flesh. In such cases *Iodum* pellets, a dose three times a day, is indicated.

ASTHMA

Is rare in infants, but not uncommon in childhood. It is a spasm of the bronchial muscular fibres. The frequent connection between asthma in children with some form of skin eruption that has been "cured" by local medication, is certain.

Symptoms. Shortness of breath, with wheezing, coughing, anxiety and restlessness. Changes in the weather, especially when damp or cold, also overexertion, running, violent playing, will bring on an attack. Sometimes the so-called third tonsil is a

cause. Before a cure can be accomplished, this may have to be removed.

Treatment. For the acute attack I have found it necessary to find the remedy especially adapted to each case. When found, it will help in every subsequent attack. *Belladonna* and *Ipecac.* are frequently indicated. When there is a dry, spasmodic cough, *Ferrum phosph.* will be indicated with *Bellad.* A dose of the selected remedy may be given every half hour. But for the permanent cure of this affection, a regular course of constitutional homœopathic treatment should be instituted. *Natrum sulph.* is one of the most important remedies to be taken for several months, a dose night and morning.

BILIOUSNESS.

A condition characterized by headache, drowsiness, furred tongue, loss of appetite, bitter taste and constipation.

Treatment. Children subject to biliousness should not eat too much meat, drink water freely, eat fruit and vegetables. Whole wheat bread, or rye bread, should be used instead of white bread. See that the skin is in good condition, and give a warm salt water bath twice a week. Among remedies *Nux,* a few pellets three times a day, followed by *Sulphur,* given in the same way, each for one week, will often eradicate the tendency. For an acute attack *Podo-*

phyllum is the best general remedy, a dose every hour until better.

Do not get into the habit of dosing children for bilious attacks, but look rather to the cause and rectify it by dietetic and hygienic measures.

BITES AND STINGS.

Insects in stinging usually leave their stings in the wound. It should first be extracted and the wound then treated with a solution of baking soda. A freshly sliced onion applied is of service. If fresh leaves of the houseleek are handy, bruise these and apply. A strong solution of *Ammonia* is often effective. The best homœopathic remedy is *Ledum tincture,* which may be applied and drop doses taken internally.

BLEEDING OF THE NOSE.

This is usually an innocent matter occurring in the course of some acute diseases, especially in full-blooded children. If too frequent or persistent, besides cold water to nose, pressure applied to nostrils, cold to neck and spine, give *Hamamelis extract,* a teaspoonful in a cup of water, sipping it every few minutes until better. *Arnica* is the remedy if due to exertion or injury. Often a small ulcer upon the septum is the cause of obstinate nosebleed. Apply locally *Calendula* and *Boracic acid cerate* and give *Ferrum phosph.* 6x three times a day.

BOILS.

The best remedy to give at the commencement, along with the application of warm poultices, is *Arnica,* five drops being dissolved in a tumblerful of water and a teaspoonful taken every two hours. The increase of the boil will thus, in most cases, be stopped, and on expression of the contents, healing quickly follows. If the formation matter is attended with throbbing pain, *Hepar sulphuris* should be given every two hours, a quantity of the powder of the size of a pea placed dry on the tongue. (See, also, Abscess.)

BONE, DISEASES OF

Which have a scrofulous origin, such as white swelling of the knee and hip-joint disease, can by no means be treated without medical aid. If it is impossible to resort to a homœopathic physician, there may be given at long intervals *Silicea, Phosphorus, Calcarea Fluorica,* three doses daily, each for one week. Meanwhile the strength of the little patient must be kept up by careful attention to diet, nourishing and easily digested food being of prime consideration. Bovinine, some malt preparations, milk and eggs must form part of the dietary.

BOWEL OBSTRUCTION.

Bloody movements, slime and mucus and constipation *may* be due to obstruction of the bowel. The child screams with pain; the abdomen is dis-

tended and tender, vomiting and convulsive symptoms. A physician must be summoned, but until his arrival give an enema of soap suds, to which a few drops of *Spirits of Camphor* may be added. At the same time use hot fomentations to the abdomen.

How to Give an Enema. Have everything ready and laid on a chair or table near by; the nurse takes the baby on her lap and lays it on its left side with the knees drawn up. This is easier said than done with a struggling baby. The tube, which should be the smallest that comes with the syringe, should be oiled, the air expelled and the tube inserted in the rectum and the bulb *gently* squeezed. Pressure is applied over the rectum to retain the enema for a short time. (See Constipation.)

BRONCHITIS.

Acute inflammation of the mucous lining of the air-tubes of the lungs, involving more or less the smaller tubes.

Bronchitis is one of the most important diseases of childhood on account of its frequency, its liability to complication with pneumonia simply by extending to the smaller tubes and finally to the air-cells, and the danger from suffocation which the blocking up of the tubes involves.

Causes. Cold, keen and cutting winds, or sudden changes of temperature; insufficient clothing; inhalations of dust, smoke, or other irritative sub-

stances. Bronchitis may also arise during measles, whooping-cough, etc., especially in weakened children.

Symptoms. Feverishness, headache, lassitude, cough, a feeling of tightness in the chest, especially the front portion; the breathing becomes difficult and hurried, with wheezing or whistling sounds; there is a severe cough, which is at first dry, but is afterwards attended with sticky or frothy expectoration, which is sometimes streaked with blood, afterwards becoming thick, yellowish and mattery. The pulse is frequent, often weak; the urine scanty and high colored; the tongue foul, and there are pains in the forehead and eyes, aggravated by the cough. Unfavorable symptoms are: *Cold* perspiration; pale and livid cheeks and lips; cold feet and hands; rapid breathing, the sides of the nostrils flapping widely at each breath; drowsiness; *extreme prostration;* rattling in the throat; and complete insensibility. In favorable cases the disease begins to decline between the fourth and eighth day.

Treatment. *Aconitum.* Febrile symptoms, especially at the commencement, when it may shorten the attack, or even arrest it at once. Further indications are: A short, *hard cough,* from tickling of the windpipe and chest, causing frontal headache; burning and soreness in the chest.

Ferrum phos. may follow *Aconite* for similar symptoms, but the child is not so restless, but rather quiet, as if suffering more.

Tartar emetic. Wheezing in the chest; suffocative cough, with copious, loose expectoration, and sickness; short breathing, palpitation and headache.

Bryonia. Rapid and difficult breathing, suffocative cough with pain; wants to be perfectly quiet.

Ipecacuanha. Cough in fits; retching; vomiting of mucus; short, continuous, hacking cough.

Calcarea phos. 2x trituration, four times a day, in the tedious cases of delicate children.

Administration. A dose every two hours; during recovery, less often.

Accessory Measures. The patient should be kept in a warm atmosphere (65° to 70°), which should be moistened by steam (a kettle may be kept boiling on the fire). A warm wrapper should always be in readiness, so that if the child suddenly asks to be taken out of bed, he may not be exposed to any risk of taking cold. Another important point is the *posture* of the little patient. He should not be laid quite flat, but somewhat *propped up in bed.* This posture favors the general circulation and enables the patient to take an easier and deeper breath. The patient should be kept very quiet, have little pieces of ice to suck, gummy kinds of drink, and liquid farinaceous food. In feeble children, and in prolonged cases, exhaustion is liable to come on, requiring nourishing support, Cod-liver oil, etc.

Tedious cases are much helped by rubbing in sweet oil all over the chest by a good fire; repeated night and morning.

BRONCHO-PNEUMONIA.

This is a serious disease, occurring most frequently in children under five years of age, and as a complication frequently of other diseases, measles, whooping-cough, and occurs in rickety children especially. If the tubercular diathesis be present, recovery becomes doubtful. In such cases the course will be tedious; the temperature remits, but the case is apt to continue in spite of the treatment. When a child suffering from an ordinary attack of bronchitis suddenly shows an increase of severity of all symptoms, fever, respiration and pulse increased, marked difficulty of breathing, frequent cough, nostrils working, much restlessness, it is more than likely that a case of broncho-pneumonia has developed; that is, some of the smaller lobules of the lung have become inflamed and the air cells of the part affected become filled with mucus which now takes the place of the air. It is a dangerous disease and needs very careful treatment and nursing, and medical attention on the part of the family physician. The rythm of respiration is disturbed. The normal rhythm is *inspiration, expiration, pause.* In this disease it is *inspiration, pause, expiration,* the latter with an effort and grunt. Among remedies *Ferrum phos., Tartar emet.* and *Phos-*

phorus are the most important. Begin treatment with *Ferrum phos.*, a dose every half hour, and follow after several hours with *Phosphorus* and *Tartar emetic*, hourly doses alternately. When improvement shows itself, the interval between doses may be lengthened. In the tuberculous type, *Arsenic jod.* and *Iodoform* are the remedies that promise most. Convalescence is slow, and for the full restoration to health a change to a mild, warm climate is often advisable. It is in these cases that *Cod-liver oil* often comes in very helpfully as a nutrient tonic.

BURNS AND SCALDS.

Treatment. (1) Cover the burn immediately with cotton wool, to exclude the air; or, for the same object, (2) cover with linen rags, or cotton wool saturated with olive oil; or, (3) powder the wound plentifully with flour, keeping it well covered by new applications if necessary; or, (4) cover the whole with a plaster of soap, made by scraping white curd soap and working it into a salve with tepid water and spreading it upon linen or muslin. Slight or superficial burns or scalds may be relieved by holding the part to the fire, or by applying spirits of turpentine, brandy or spirits of wine to them. In dressing burns, puncture the blisters and remove the old skin, but expose the wound as little as possible to the action of the air; do not dress oftener than once a day, and do not disturb the

parts by washing them. The exclusion of the air from the part affected is of the utmost consequence, and it is best to apply that dressing which can be obtained the quickest. *Carbolized vaseline* is an excellent application, and should be substituted for plain olive oil when obtainable. Internally, give *Ferrum phosph.* 6x trituration, a powder dissolved in water, and teaspoonful doses every hour. In severe burns, *Cantharis* 3, internally is of great value.

CATARRH.

In its various forms, is one of the most common diseased conditions known. It attacks all ages and classes, and tends to run a chronic course, and predisposes to serious diseases of the lungs and other organs. The skin which lines all passages of the body—nose, throat, bronchial tubes, œsophagus, stomach, etc.—is called the mucous membrane. Countless little glands come to the surface of this skin, or membrane, and exude into the passages a thin liquid called mucus, which keeps the passages smooth and moist. Catarrh totally changes the condition of these glands by enlarging and inflaming them and by causing the death of many of their cells. These dead cells are next expelled from the mouth of the gland in a stream upon the surface of the mucous membrane. What had been, in health, a thin liquid secreted from the blood, and containing just the properties to keep the membrane smooth and healthy, becomes now a thick mass of

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[illegible] teaspoonful taken every
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[illegible] S' DANCE.

[illegible] crying of some or all
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Sulphur when the skin is dry and unhealthy. Children who do not like to be washed. Take cold constantly. Feet burn and want to be uncovered.

Kali bich, perhaps the best general remedy to begin treatment with. When the discharge is stringy, tough and drops down into the back part of the throat, it will soon show its beneficial action.

Hepar. When the child is exceedingly sensitive to all changes of weather and touchy generally.

The selected remedy should be given persistently for several weeks, a dose three times daily, before trying another. Many cases require some local treatment by means of a spray, one of the best being *Hydrastis,* to be followed later by one containing *Eucalyptus,* one part of the tincture to five of warm water, to which a pinch of salt has been added.

CHAFING

Is produced by friction, especially in fat children, and usually in the groins, neck, etc. The parts should be well washed and carefully dried and dusted with *Calendulated Boracic acid.* If bathing with water smarts, use milk to which some *Aqueous Calendula* is added, and then powder. A few doses of *Calcarea* will often take away the tendency to easy chafing.

CHILL.

The first and best medicine on taking chill, with shivering and feverishness, is always *Aconite 2x.* Employed early, this is by itself the master remedy

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The treatment of the various forms of cold by means of homœopathy is exceedingly satisfactory. Not only is it the pleasantest method of treatment, but also the speediest and most effective. The process is nipped in the bud, and what might otherwise develop into a serious disease, be it bronchitis or other acute and dangerous illness, passes off in a few days without any after-effects or chronic lesion. Repeated colds do weaken the resisting power of the organism and thus perpetuate themselves. In these cases it is necessary to look to the diet and hygiene of the little patients and then prescribe some constitutional remedies to overcome the undue tendency to cold-taking. Such children must be guarded against the too free use of sweets, mushes, etc., and be given for several weeks or months daily doses of *Calcarea* and *Sulphur*. The good effects will soon be seen in a lessened tendency to take cold, and in milder attacks when they do come. Besides this necessary medicinal eradicative treatment, attention must be paid to the diet, which must be wholesome, simple and well prepared; clothing, which must not be too heavy and warm, so as to produce perspiration on the slightest exertion, or, on the other hand, unnecessarily exposing the limbs for "hardening" purposes. See that the bed-rooms are well ventilated, for polluted air poisons the blood and favors catarrhal conditions. Avoid, as a rule, gas-heated stoves, unless provided with a flue. See that the drainage pipes are perfect and the gas fixtures free from leaks, especially at this time, when gas is very

poor and cheap. The respiratory portion of the nasal cavity is very narrow and trifling catarrhal condition may cause complete obstruction from the congestion and secretion caused by the coryza. Young children easily take colds in the head, with swelling of the mucous membrane and occlusion of the nasal passages.

The proper treatment of acute colds, whether attended by fever or not, is to put the child to bed. The proper temperature of the room ought to be about 70° F. Hot lemonade is the best drink; warm drinks generally; milk and some effervescing or plain water, soups, broths, gruels, milk toast, baked apples or stewed fruit, oranges, constitute the bulk of the diet for a day or two, until improvement sets in. Among the remedies for colds, the following can be relied upon to modify every case, and, when indicated, to promptly "break it up." The weather and season influence to a considerable extent the selection of a remedy. *Aconite* is especially called for in sudden change to a dry, cold state of the weather, after exposure to cold wind. *Gelsemium* acts best for colds in rather warm weather, relaxing conditions of the atmosphere. *Dulcamara* is suited to damp, rainy spells. Again, the character that the cold assumes helps to determine the remedy. Thus, an acute coryza with much sneezing and running at the nose, thin, watery discharge, is cured magically by a few doses of *Natrum mur.* If the coryza soon stops and the cold travels downward and settles on the chest, *Kali hyd.* will be the proper remedy. As

a rule, the best general first remedy for colds as manifested throughout California is *Quillaya,* which will either stop the process after a few doses or prepare the way for some other remedy. A few doses of two pills each given every half hour will modify the course of many a cold and cure radically quite a percentage. (See Catarrh.)

COLIC.

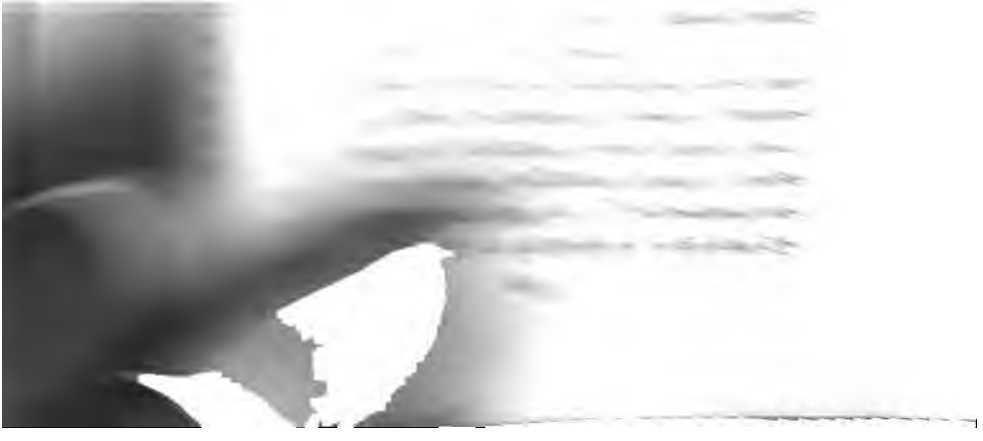
Pain in bowels, usually due to flatulence, indigestible food, drinking cold water, worms or other intestinal irritation, lead poisoning, etc.

There is usually no fever present. In children there is with it much crying, writhing of body, legs are drawn up towards the stomach, rumbling in bowels, and the pain is relieved by firm pressure and hot applications.

Repeated attacks of intestinal colic in older children should receive the attention of a physician, as they may indicate appendicitis.

Treatment. Apply heat to abdomen and be sure that the feet are dry and warm; give an injection of warm water if the bowels have not moved.

The first remedy to be given is *Chamomilla,* which will usually help after a few doses. If necessary, follow with *Magnesia phos.* 3x trituration. Flatulent colic, forcing the patient to bend double; in children the legs are drawn up. Colicky babies when



giene, besides the carefully selected homœopathic remedies. Avoid purgatives of all kinds. The habit of using them is worse than the constipation. Oftentimes a little *Sweet oil* will have the desired effect. Use a good, pure, California olive oil in teaspoonful doses. To produce an immediate result it may be necessary until the remedies have time to act to give a small enema of soapy water to unload the bowels, or a conical stick of castile soap, which should be tapering and from two to three inches long, may be inserted. *Glycerine suppositories* are good, but must not be given too often, as they have a tendency to dry the lower bowel. None of these measures should be used regularly—they are unobjectionable occasionally, but harmful if used all the time.

Diet. Regular intervals of feeding must be observed. Between the feeding the baby should have sips of cool water offered, especially when the stools are hard and dry. Especially necessary in warm weather and whenever the urine shows a red deposit on the napkin. In bottle-fed children beware of starchy food. Sometimes sweetened water with a lump of sugar or brown sugar will be useful. Again a half to a whole teaspoonful of molasses, and, in older children, a piece of molasses candy may prove desirable. But in some children sweets ferment in the intestines and thus are hurtful.

Oatmeal gruel, graham flour gruel, corn meal or a teaspoonful of malt extract, or the addition of

Æsculus is an excellent drug when the stools are in dark hard balls and the mucous membrane is dry. In aggravated cases

Opium 30 may follow with advantage. Other children are benefited by *Sulphur* 30 night and morning.

Bryonia when the stools are very large and dry, the little patient does not like to make much exertion of any kind. This may be followed by

Alumina 30, a dose night and morning. If these remedies do not suffice the case must be studied more carefully by a homœopathic physician.

COUGHS.

A cough is a common symptom of a cold on the chest or throat. It is frequently of short duration and yields readily to simple home remedies, or better, to the proper homœopathic medicine. Again, it is a symptom of more serious diseases, bronchitis, pneumonia, consumption or reflex from worms, or other irritation. When not accompanied by fever and general ill feeling, it is the more frequent form of a cold, and this is the only cough coming within the range of domestic treatment.

In selecting a proper remedy see if the cough is dry or loose, painful, and note the conditions under which it is worse or better, whether in open air, morning or night, etc.

For dry coughs, *Aconite, Bellad.* and *Spongia* are the best remedies. For loose, *Pulsat, Tart. emetic.*

Aconite dry cough after exposure to cold wind, croupy cough coming on suddenly at night with hoarseness, fever and restlessness.

Belladonna dry, hacking cough, worse at night, preventing sleep, with sore throat, headache.

Bryonia. Hard, dry, shaking cough with sore chest, stitches, worse moving about. Will often loosen up a cough.

Hepar. Hoarse, croupy cough coming on after midnight, throat sensitive with feeling of splinter in it. Child is extremely sensitive to cold.

Ipecac. Violent, constantly hacking or suffocating cough, with nausea or vomiting; child becomes stiff and blue in face.

Tartar Emet. Loose cough, much rattling of mucus; child sweats a good deal, and is weak and drowsy.

It is not wise to suppress a cough by means of any preparation containing *Opium.* Most of the cough syrups contain more or less of it and are hurtful, especially for babies and young children, the exception being the Homœopathic Cough and Croup Syrup, which is harmless and adapted to most kinds of cough. Malt bon-bons or some *Glycerine jujubes* are harmless and often soothe the dry, irritated throat, and may be given in conjunction with homœopathic remedies.

CROUP.

The word croup, as usually used, applies to what the physician knows as false or spasmodic croup, in contradistinction to true or membranous croup. The latter is one of the most dangerous diseases of childhood and has a very high rate of mortality; but while so dangerous it is, fortunately, correspondingly rare. Spasmodic croup, on the other hand, is a very common complaint among young children, and is attended with comparatively little danger. The more gradual and insiduous the onset the more likely it is that true croup is threatened, and no time should be lost to consult a physician.

Spasmodic croup is peculiar in coming on very suddenly in the night. The child has been exposed during the day, usually to a dry, cold wind; he may show some signs, before going to bed, of having taken cold, but there is no cough. Suddenly in the night, usually after midnight, he wakens with a start and with great difficulty in breathing, he gasps for breath, and, if old enough, clutches at his throat; can hardly talk above a whisper; the cough is explosive and very hard, described as crowing, barking, metallic, brassy; the cough, in short, is "croupy." What that word means to one who has once heard it! These symptoms are indeed alarming, but yield readily as a rule to homœopathic remedies and hot compresses to the throat.

Treatment. Give *Aconite* 3x, a dose every five minutes till the severity of the symptoms has

correct these abnormal conditions careful regulation of the diet and homœopathic remedies are required, but only a competent physician can undertake the care of these patients, as much time and patience and close study must be given to each individual case. (See Scrofula, Tuberculosis and Rickets.)

DIARRHOEA.

This is a very frequent symptom of many different diseases and is itself a serious ailment when occurring during teething, or as summer diarrhœa or cholera infantum. It should never be allowed to go unchecked or to continue without discovering its cause.

The various forms of diarrhœa which prevail among children have been given different names; they are grades of one and the same disease. Cholera Infantum needs the heat of summer for its development, and is attended with great prostration and danger of collapse. If simple diarrhœa is not cured it is apt to be converted to inflammatory diarrhœa, called Entero-colitis, which may last a month or more and is a serious matter.

Causes. Improper food, especially farinaceous, unclean milk or such as has been transported for too great a distance; contaminated water; malaria due to imperfect sewerage; atmospheric conditions; sudden changes; summer heat, etc.

Symptoms. The normal infant stool is yellow, homogeneous and about the consistence of thin mush. Abnormal types are

Green Stools, when green immediately upon passage due to fermentation, the result of bacterial action.

Curdy Stools, due to undigested casein or fat.

Slimy Stools are the result of catarrhal inflammation.

These vary extremely, even in recent and acute attacks, from a slight, painless increase in the quantity, frequency, and altered form of the evacuations, to violent, painful and frequent purging; watery evacuations, perhaps several times every hour, being ejected with spasmodic force. In the more severe stage they are sometimes streaked with blood, and mixed with mucus. There is also generally sickness, thirst, and an interruption in the nourishing process. The eyes are sunken, the features pinched and darkish; the pulse rapid and feeble and the extremities cold.

Treatment. Stop all food for a little while, or give only a little barley water or veal broth. In many cases small quantities of iced milk containing a tablespoonful of lime water to a gobletful of milk is sufficient. It is refreshing, nourishing and astringent. Rice gruel, boiled rice milk thickened with flour and seasoned with salt makes an excellent

dish in diarrhœa. Barley water with white of egg, adding the white of one egg to about four ounces of barley water, is a most valuable aid and will often relieve when other foods fail. Clean mashed carrots boiled in lamb broth makes an admirable food in wasting diarrhœa. The abdomen and feet ought to be kept warm. A flannel bandage is advisable.

Chamomilla. Diarrhœa from cold during teething, with colicky pain; child is very fretful and restless; one cheek hot and red; yellowish skin.

Ipecac. Child seems much nauseated with the attack, or even vomits; stools are bloodstreaked, dark.

China. Painless stools. Abdomen distended; full of wind; child is weak and perspires.

Calcarea. Diarrhœa during teething; stools clayey or sour; child perspires a great deal. Especially adapted for fat children with cold, damp feet and swollen stomach.

Podophyllum. With the diarrhœa child grinds the teeth, rolls the head; skin jaundiced; bowels come down; stools very profuse, painless. Of the selected remedy a dose should be given after every evacuation. (See, also, Indigestion.)

DIPHTHERIA.

A highly contagious disease due to a specific micro-organism poisoning the blood and producing a pseudo-membrane in the throat.

Symptoms. The child will complain at first of sore throat associated with fever, offensive breath, swelling of glands at the angle of the jaw, pain on swallowing, pain in back and limbs. On examining the throat it will be found red, tonsils swollen and covered with patches of membrane. This will spread rapidly for several days. There is also enlargement of the glands of the neck, drowsiness and aversion to food. In malignant types the inflammation is apt to extend to the air passages, nose and larynx, which is most fatal. Dangerous symptoms are increased, drowsiness and delirium, feeble pulse, great fever, bleeding from nose, hoarseness and increased swelling of the glands about the neck. During convalescence there is great danger of paralysis of the throat, shown by difficult swallowing, hoarseness, and especially loss of nervous power of the heart with feeble action and possibly sudden death from heart failure.

Treatment. As the discharges from the mouth and nose carry the infection, the greatest cleanliness and antiseptic care must be given. An abundance of cloths must be provided, to be burned immediately after use. Diphtheria is caused by a germ which settles on the back of the throat and grows there, at the same time producing a poison which spreads all over the system. The treatment must therefore be both local and general.

The patient must be isolated. The temperature of the room should be 65°. Best to have some moist

air by keeping a kettle of boiling water in the room, to which some vinegar may be added. A spray of *Peroxide of Hydrogen,* 1:4 of water administered in a glass atomizer, or one of permanganate of *Potash,* 1 to 1,000, every two hours, is the best local treatment. But if the little patient strongly objects to local treatment, so that he requires physical restraint, I forego it altogether and rely on internal remedies alone. Children old enough to gargle should do so with alcohol diluted in four parts of water and one of vinegar.

Diet. This is most important. Even if it pains to swallow food, the patient ought to be encouraged to take it. In this disease, stimulation is of great use; hence a teaspoonful of whisky diluted with water, or, better still, with milk, every two hours, should be given unhesitatingly. Milk, beef-tea, broths, eggs, egg-nog, coffee at times, ice cream, bovinine, beef-juice, should form the list from which a selection be made.

Children who persistently refuse to swallow must have nutritive injections in bad cases.

If vomiting occur, sucking small pieces of ice tends to allay it; ice also affords comfort to the patient, and favors the action of the kidneys.

Medicines. Diphtheria must invariably be treated by a physician, and in no case must any time be lost. Call him early and carry out his directions to the letter. Until his arrival half hourly

Kali bich. Hoarse, croupy cough. Tough stringy discharge. Diphtheria extends to the nose.

Lachesis. Very sensitive to anything around throat. It is worse on the left side. Patient is always worse after sleeping.

Mercur cyanatus 6x. Great prostration and malignant cases.

Mercur bijod. 3x. Much swelling of glands on outside of throat. Tongue heavily coated and slimy.

Dose. Of the selected remedy a dose should be given every half hour in severe cases; otherwise every hour. When improvement shows itself, the remedy must be given less frequently.

EYE AND EAR TROUBLES.

All serious eye diseases require the care of a specialist. Go to a homœopathic specialist, who is able to combine local surgical and mechanical treatment with constitutional. A common trouble is *conjunctivitis,* an acute inflammation of the lining of eyelids and eye ball. Cold, draughts, changes of temperature, strong light, heat, smoke, dust, or foreign bodies in the eye, usually cause it.

Symptoms. Itching or soreness; dread of light; feeling as of sand under the lids; *redness of the eyes,* with swelling of the vessels; pricking or shoot-

ing pains; small swellings or pimples, and scales on the lids; the pains increase in the evening, and on exposure to cold, and there is stickiness of the lids in the morning. In some cases there is a mattery discharge, which may be communicated to another by touch.

Aconitum. Catarrhal Ophthalmia; the white of eyes is covered with swollen blood vessels, which present the appearance of red network.

Belladonna. Pain, redness, and swelling; throbbing in the temples; *flushed cheeks.* glistening eyes and *dread of light.*

Squint. A condition in which the visual lines do not meet at the point fixed. When one eye fixes or looks at a given point, the other eye turns in toward the nose. Once established, the condition generally remains permanent. But even if they outgrow it the eye is left with its sight permanently weakened.

Treatment consists in fitting proper glasses. Sometimes a course of remedies, especially *Gelsemium* and *Cicuta,* will prove beneficial. Give a dose three times a day.

Eyelids are often swollen, red and inflamed, and crusts are apt to form on the margin.

The chief medicines are *Graphites, Calcarea* and *Sulphur,* three doses of one daily for several days; then follow with the others. Local applications must be avcided, as a rule, but the lids may be bathed with warm milk and water.

Ears. A discharge from the ear should never be neglected. It is usually the result of an acute inflammation of the middle-ear, and often follows measles and scarlet fever.

The principal remedy is *Pulsatilla,* followed by *Calcarea;* but it is advisable in all cases to consult a competent specialist should these remedies not soon cure the case.

Earache. A very common complaint in children, arising from colds, due to exposure to wind or draughts, improper bathing, etc. The crying of children from earache is spasmodic, and the hand is carried to the head, indicating the seat of the trouble. There may be some fever, much restless tossing about, hot head, etc. Earache is always a serious matter and must be attended to. Frequently it is followed by acute inflammation of the middle ear, with subsequent discharge and chronic suffering, or the inflammation may extend to the mastoid and brain, necessitating an operation. So if the simple measures do not bring relief, call in your physician for further advice.

The treatment consists in the application of heat to the part, a few drops of warm sweet oil inserted into the outer ear and the internal use of

Aconite. A dose every ten minutes when the child is restless, feverish, cries much, and after exposure to cold wind.

Belladonna. When the child becomes excited, is delirious, pupils dilated, hot and sweaty head, cries

out frequently, even in sleep or when the pain prevents sleep.

Chamomilla. When one cheek especially is red and hot, and the child is very irritable and cross. Warmth seems to make matters worse.

Mullein Oil. A few drops warmed, inserted into the ear often acts magically and is advisable after the acute symptoms have passed away, especially if the child seems to be somewhat deaf.

ECZEMA.

This is the most frequent skin affection of childhood, often connected with faulty feeding, frequently a manifestation of uric acid diathesis, and hence in children of gouty parents and in scrofulous types of children. Indigestion is the most important cause. It is sometimes difficult to determine just where the error lies, whether in the quantity or quality of the food, or in too frequent feeding, hence from overwork of the stomach the food being improperly digested, and ptomaines and other products of auto-intoxication form giving rise to skin and mucous membrane disturbances. Older children get sometimes skin affections from the too free use of sugar in their dietary. Sometimes strong soaps cause it, and too vigorous use of even harmless soap and water in very sensitive skins.

The treatment consists in the proper local care of the skin, regulation of diet and administration of

internal remedies. These latter, however, must be carefully chosen and not given too often.

In every case of eczema, one symptom will always be present, and that is the terrible itching. The presence of this annoying condition is with the child the most serious impediment to a speedy cure, for scratch he must and will, and application soothing to the irritated skin of some sort must be made. My plan is to prescribe for this purpose cornstarch, which I use freely and at all times. It certainly allays the itching to some extent and protects the irritated surface and absorbs the exudation. I do not advise the free use of water. For the bathing that is necessary I prefer bran water or warm milk and water, and after thorough drying with a soft towel, the free use of cornstarch. Besides these simple local measures the *Benzoated zinc ointment* is a useful preparation. But the scabs and scales must first be removed by washing with warm milk, then the salve may be applied by means of a bandage. Local application to be really effective, must be adapted to the stage of the disease, thus salves that would benefit in the later stages, when there is not much moisture or exudation, would really do harm when used earlier. I do not like stronger applications, especially the mercurial preparations, for there is certainly danger of suppressing the local symptoms and producing permanent affections of the respiratory organs, asthmatic attacks most frequently. This I know from experience. Among internal remedies the principal are *Sulphur, Cal-*

Belladonna. Bright red, smooth variety.

Rhus. When vesicles form.

Of the selected medicine, a dose of 3 pellets may be given every 2 hours. But a physician should always have the care of the case.

FEVER (Simple or Inflammatory).

Fever is a disorder of the body heat. In fever the body is incapacitated for work. The energy that would naturally be force is changed into heat. There is an increased wasting of the tissues. More fuel is consumed. When the thermometer shows a temperature of over 98½° F. it is called fever. Ordinarily, with a rise of temperature, there is an increase in the heart beats and number of respirations.

Shivering, sickness and pains in the back, followed by hot dry skin, thirst, headache, short breathing, quick full pulse, loss of appetite, and scanty urine. Simple fever is mostly a slight and transient disorder when occurring alone, but when fever accompanies eruptive or inflammatory diseases it becomes more serious.

The fevers of childhood are for the most part symptomatic, such as those which accompany dentition, eruptive diseases, colds, inflammations of various organs, malaria, worms, indigestion. Often the child is thrown into a feverish state, and the clinical thermometer will show quite a rise, simply from a constipated state of the bowels, a fit of indi-

gestion due to a slight error in diet, etc. A foul state of the stomach and sluggish bowels are a very frequent cause of fever in children. With it we may have difficult breathing, dilated pupils, sleeplessness, and even spasms. Before remedies can do much good, the intestinal tract should be cleared by stopping all food, giving lots of water, orange juice or unfermented grape juice. Give an enema at once and some simple medicine acting gently on the bowels. This treatment for these cases is self-evident, and then follow it with a few doses of *Nux,* three or four pellets every hour.

The catarrhal fever as an accompaniment of acute colds, especially when epidemic, like grippe, is known by the other symptoms, such as coryza, cough, aching in limbs, etc. Exposure to cold and so-called bilious states predispose the system to ready acceptance of the reigning epidemic influence. The remedies most often indicated are *Aconite, Gelsemium* and *Bryonia.*

Aconite. After exposure to dry, cold air; patient is restless, hot, nervous, much fever, thirsty. A few doses every half-hour will often break up the whole condition, produce a gentle, sweet sleep, and patient awakes comparatively comfortable.

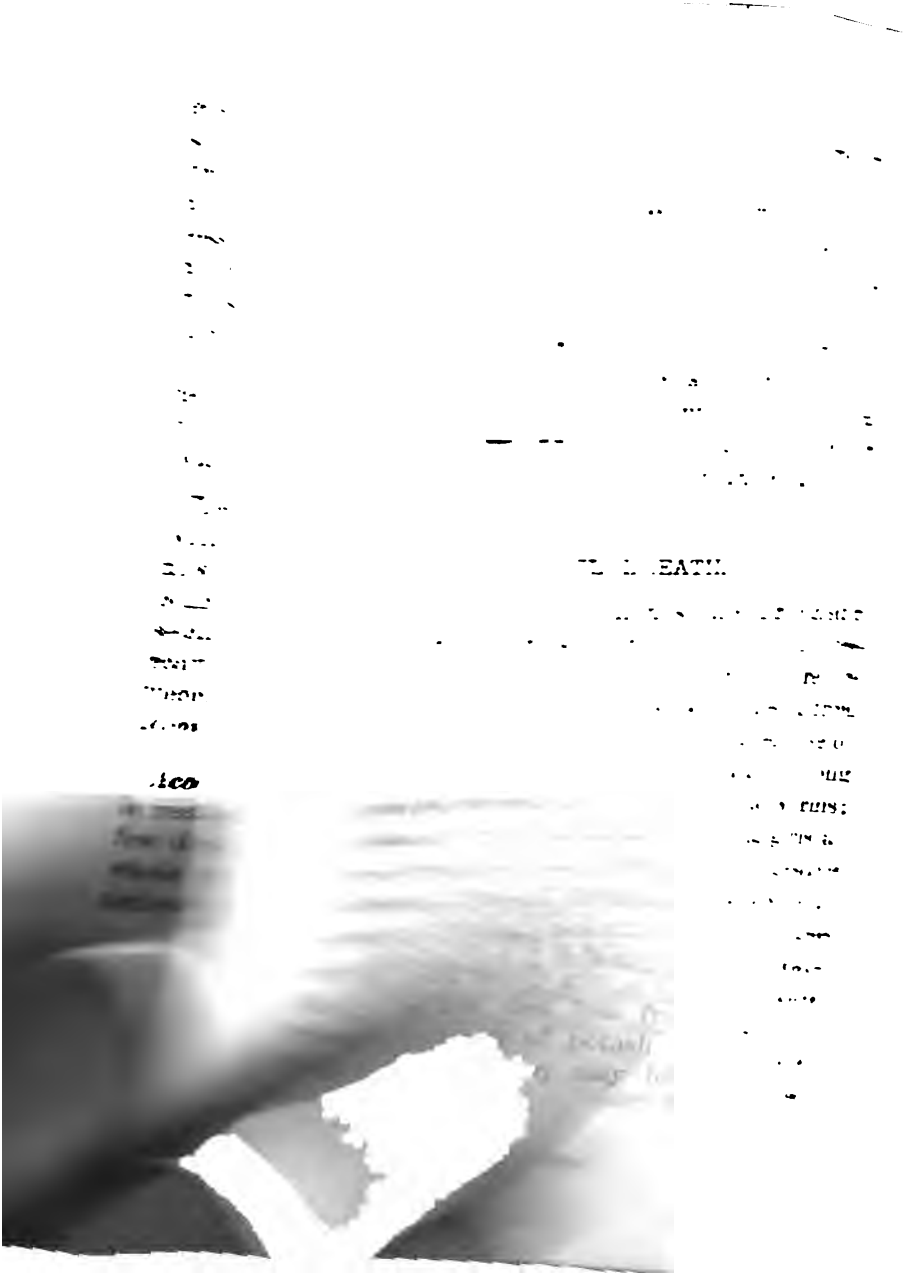
Gelsemium is to be preferred when patient is quiet, drowsy, chills up and down the back and very languid. Patient is dizzy, has headache and general aching.

Bryonia may follow either when tongue is much coated; thirsty, costive and irritable. More or less coughs and rheumatic pains. Patient wants to be quiet, does not want to be carried about or moved much.

Children sometimes do have worms, more often however not, when they are supposed to be so afflicted. In case worms are actually present, besides a fitful fever, worse towards evening and into the night, there will be numerous other symptoms pointing to the abdominal disturbance. At all events *Cina,* given every three hours, will help to clear up the case.

During dentition again we have numerous reflex symptoms, and fever is a frequent symptom. Here *Aconite* for excitable, nervous, restless, crying children, followed by *Belladonna,* when they cannot sleep, start and twitch, will make the little victims comfortable. Do not forget the soothing effects of a frequent sip of cold water in the fevers and restlessness of teething children, indeed plenty of fresh water in all cases of sickness attended by fever.

In the treatment of fever, the room in which the patient is should be cool, airy and well ventilated, and kept at an even temperature of about sixty degrees. The covering of the bed should in general be light, but suited to the feelings of the patient; the linen should be often changed, and the patient may be frequently sponged down with tepid water. The diet must be light, easy of digestion, and unstimulating—barley water, thin gruel, or arrow-



GLANDULAR AFFECTIONS.

No class of diseases is more strikingly benefited by homœopathic remedies as acute, and especially chronic inflammations of the various glands throughout the body. There is usually a scrofulous taint at the bottom to account for the readiness with which, from apparently slight causes, the glands will grow painful and swell. The treatment of chronic cases requires patience and not too frequent change of remedies. *Belladonna* is the chief remedy for all acute swellings. *Calcar. phosph.* for more chronic cases. Commence with the second trituration. Give three doses daily for one week; then give the third, sixth and twelfth potency in the same way. *Silica* for suppurating glands. If pus forms, it should be evacuated by a surgeon; the abscess must not be allowed to open itself, otherwise ugly scars will form.

GRAVEL.

Whenever there is a sandy sediment in the urine care should be taken to change the diet, avoiding too rich food and drinking plenty of pure water.

The chief remedy is *Lycopodium,* a tablet three times a day; but if there is much acidity at the same time give *Natrum phosph.* instead.

GUMS, SCURVY OF THE (Canker of the Mouth).

Offensive smell in the mouth with a glutinous bloody discharge from the gums, which are hot, red,

homœopathy is very successful, but the selection of the needful constitutional medicines is usually beyond the parents' province, the regular family physician being the one to advise.

Treatment. *Aconite* will prove beneficial when the head is hot and there is a bursting feeling—the child is restless and very sensitive.

Belladonna is the principal remedy for headaches in full blooded children who cannot stand any jar or noise and feel better in a darkened room. Sometimes the pain comes and goes rapidly and is worse on the right side.

Bryonia when the headache is accompanied with coated tongue and costive bowels. Child is thirsty and wants to remain perfectly quiet; complains of the pain immediately on rising in the morning.

Nux. Headache due to stomach disorder from mixed diet, coffee, tea, with constipation, from overstudy. Catarrhal headache, when the nose is stopped up at night. Child becomes irritable in consequence.

Sulphur. Headaches recurring periodically, every week or two. Child suffers with burning feet, kicks off the bed clothes at night, has very red lips, dry skin, does not perspire.

Calcarea phos. is another constitutional remedy for headaches in rapidly growing children and at time of puberty.

the parts with water containing a mild *Carbolized glycerine solution* is grateful. After bathing use some dusting powder.

Apis is a useful remedy to begin treatment with, followed by *Natrum mur.* A dose should be taken every two hours.

Pulsatilla after errors in diet; rich food.

Arsenicum in obstinate cases, and when due to ices, fish or tainted food.

HOARSENESS.

Is a usual symptom accompanying colds, and passes away with the other symptoms. If persistent, sipping warm milk and water and taking a few doses of one of the following remedies will usually cure it speedily:

Carbo when the hoarseness is worse morning and evening and after talking.

Causticum, if associated with soreness of chest, cough, better drinking cold water.

Phosphor. if hoarseness is worse in the evening and larynx feels sore when talking.

A dose of the selected remedy may be taken every hour.

INFLUENZA (La Grippe).

True grippe is an infectious disease characterized by fever, great prostration, catarrhal symptoms,

INDIGESTION.

The various dyspeptic conditions of infants, from simple indigestion to various forms of bowel trouble, ending with the dreaded cholera infantum, or summer complaint, form by far the most frequent diseases of infants, and it is especially in these diseases where domestic management and intelligent care as to the diet and surroundings of the little sufferer can do more than mere medicine, and without which the best medicinal treatment will be of no avail. Two factors account for the great prevalence of these conditions in infants—namely, first, *the great sensitiveness of the whole digestive tract,* the mucous membrane being exquisitely alive to all foreign impressions so that it will react violently to anything irritating; and secondly—*errors in diet and faulty methods of feeding.* Thus the largest number of dyspeptic victims is furnished by *artificial feeding,* because hand feeding, in order to be successful, must be an intelligent and rational procedure. Most frequently it is some form of *starchy* food that first upsets the digestive tract, for it is not until after the fourth month, practically not until the first half year is passed, that the salivary glands enter into functional activity and starchy food needs the presence of saliva for its perfect digestion, hence if given before this time, it will surely set up a gastric and intestinal catarrh, the chief symptoms of which will be some form of diarrhœa.

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acter. Instead of one or two discharges, we may have as many as twenty per day, frequently half a dozen at least; the consistency is changed, the stools are thinner, watery, containing whitish lumps of undigested milk; often are greenish and offensive. Of course such a state of things soon shows itself in the general appearance of the child. It grows thin, lips blue, nose pointed and cold, extremities cold. In this way a simple dyspepsia soon develops quite alarming symptoms.

The child is apt to smell sour, owing to the acid fermentation of food. It is likely to have *thrush,* especially in warm weather. This looks like little bits of curd adhering to the tongue, cheeks and lips. Its presence shows a condition unfavorable to the ready assimilation of food. *Attacks of hives* and *red gum* are also certain signs of digestive derangement.

See that every simple diarrhœa is attended to—not suppressed by chalk mixture or opium, but cured—by rectifying the diet and giving the appropriate homœopathic remedy.

The best guide to the digestibility of any article of diet is watching baby's growth in stature and weight and examination of the stools. Remember that mere increase in weight, however, is not always the desirable thing it looks to be; the flesh must be firm, not flabby; the skin of that beautiful mottled character so indicative of health. We often see abnormally fat, flabby children after exclusive diet of condensed milk and various starchy foods, but fat-

ness and flabbiness is often associated with rickety bones and a similar condition of the mucous membranes, by which the child takes cold so very readily from the slightest chill or atmospheric impurity.

Treatment. The treatment of dyspepsia and the consequent gastro-intestinal catarrh and wasting consists mainly in removing the cause and surrounding the little patient with the best possible conditions for his physical comfort and well being. Look to the food and then to the method of its preparation and administration.

Breast-milk is the only proper food for infants, and practically there is no safe substitute but good cow's milk prepared to meet the infant's needs, so long as the front teeth are not cut through. *Articles containing starch,* like arrowroot, sago, potatoes, crackers and all patent foods *must not be depended upon as food for very young infants.*

The best treatment for the acute dyspeptic symptoms is to secure *rest* for the stomach and body. If there is continued nausea or retching, teaspoonful doses of ice water or some effervescing water like German Seltzer may be preferable. Good results are obtained from giving Albumen water. The cold water may be followed by small, frequent doses of thin barley water; later equal parts of veal broth and barley water, given cold and in small quantities. This can be changed to mutton or chicken broth, given in the same way. During this time heat should be applied to abdomen and extremities

and child kept perfectly quiet. Then on attempting milk give it sparingly and freely diluted with barley water. The feeding should be done very cautiously. Never give more than can be digested, in order to prevent fresh irritation and to save the energy both of the digestive organs and the body at large. On returning to milk, it may be necessary to add lime water for a time, especially if there is much acidity. Take at first one part of milk, later two, and add equal parts of barley water and somewhat less of lime water. If the child is much prostrated, five drops of old brandy in a teaspoonful of cold water may have to be given every hour or oftener, but do not administer any alcoholic stimulant without your physician's advice, if this is obtainable.

If during the hot weather season a child is suddenly attacked with vomiting, prostration and purging, it will be best for you to notify your doctor to call, put the child for a few minutes in a hot bath, then carefully dry it and wrap in warm blankets. Apply heat to extremities and abdomen, and give a drop or two of camphor spirits. An excellent stimulating food can easily be made by beating up the yellow of one egg with two tablespoonfuls of wine and five tablespoonfuls of water. This is readily assimiliated. In severe digestive disturbances, where milk cannot be borne, *Carrot Soup* is to be tried. The carrots are boiled and passed through the finest sieve and mixed with beef broth.

Return very slowly and cautiously to the ordinary diet, relying for a time on some of the gruels.

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milk and one-half soda water given cool. *Kumyss* is a refreshing and delicious beverage and fills a want often felt in the dietetics of invalids. When children can be persuaded to take it, for they object, as a rule, to the sour taste, it is much to be recommended.

Next in importance to the regulation of the food is attention to general hygienic measures.

Pure air is essential. The confined and polluted air of many rooms, especially in boarding-houses and among the poorer classes, in tenements, are productive of the disease. But even in our best houses it is but too often that the nursery and sleeping apartments lack fresh air. Do not let the regulation of the ventilation be in charge of your servants. See to it yourself, and *never* permit the drying of wet napkins in the rooms where your baby sleeps or plays. Pure, cool air acts as a nerve tonic, and the warmer the weather the more important to keep the baby out of doors. Many a little patient with diarrhœa and vomiting will sleep peacefully, and rapidly improve in the fresh, open air, when it but languishes and wastes away within doors. See that the bed is cool and dry. Sometimes a wire-woven mattress, with a soft blanket over it is an agreeable change; or, again, a hammock swung in some desirable place will bring comfort not found elsewhere.

Then remember in these dyspeptic conditions the *flannel bandage*. Indeed, this should never be taken away until the sixth month, and must be kept on so

long as the diarrhœa continues. At the same time see that the feet are always warm, and the younger the child the more important this is. Just watch the solid comfort and greatest enjoyment as you toast baby's toes before an open fire, and every nursery should be provided with such a desirable luxury, if at all possible.

Colds are very liable to produce these troubles, especially during first and second periods of dentition, these being the cold catching periods of a child's life. Protect therefrom especially the chest, abdomen, thighs and legs. Include in your baby's outfit an india rubber bag for hot water. By means of it heat can be given readily in the quickest and most effective way, and many a case of colic relieved without medicine and much crying.

Perfect cleanliness you must insist upon. It is seldom that nurses can be prevailed upon to change the napkins often enough the very moment that it is the least soiled. The parts should be washed each time and dusted with cornstarch. This will prevent chafing, which would be inevitable, especially if the napkins are not *thoroughly rinsed* and dried before using.

Sponge the entire body in hot weather with cool water once or twice a day. Add a little salt or alcohol. Have the clothing and bed clothing clean, well aired and frequently changed. If the baby is well and washed, do not neglect rubbing all over, and especially children's arms, legs and soles, with warm sweet oil.

Among the many remedies the physician has at his command, there are a few which are frequently indicated, among which are *Chamomilla* when the child is very fretful, peevish, has green stools, sour vomiting, much colic, head hot and sweaty, and one cheek red and the other pale.

Ipecac with much vomiting of food and green mucus, stools as if fermented and grass green.

Calcarea is an invaluable medicine for scrofulous or ill-nourished children, for protracted teething or defective growth, chronic diarrhœa, *whitish, sour stools* and much sweat on head, feet feel damp, abdomen apt to be large.

Be sure and call in your physician early if the child has been exposed to any contagious disease or shows signs of serious illness. Until he comes put the child to bed, give little food, all the water he wants, and exclude all other children from the room. Keep him quiet.

JAUNDICE.

Jaundice is characterized by yellowness of the whites of the eyes and the skin, whitish or clay-colored stools, and saffron-colored urine. It is attended with more or less derangement of the digestive functions. Jaundice is caused by gallstones, diesase of the liver, super-abundance of bile, improper food, cold or sudden emotions, etc.

The treatment must include careful attention to

INFECTIOUS DISEASES

	Incubation Period	Date of definite illness when the eruption		Quarantine required after *latest* exposure to infection	Infection ceases
		Appears	Begins to fade		
Chicken Pox	10 to 16 days	1st day and 3 following days	About 4th	20 days	When every scab has fallen off.
Diphtheria	2 to 10 days	.....	.....	12 days	In 4 weeks, if no discharge, or albumin, and if bacteriological examination of nose and throat be negative.
German Measles (Rotheln)	7 to 18 days or even longer	2nd to 4th	4th to 7th	20 days	In not less than 10 days from appearance of rash.
Measles	10 to 14 days	4th day. Highly infectious for 2 days before rash appears	5th to 7th	16 days	In not less than 2 weeks from appearance of rash.
Mumps	10 to 22 days	.....	.....	24 days	In not less than 3 weeks, and only when 1 week has elapsed since subsidence of all swelling.
Scarlet Fever	1 to 8 days, usually 3 to 5	2nd	5th	10 days	When desquamation, sore throat and albuminuria disappear, but never in less than 6 weeks.
Smallpox	12 to 14 days	3rd or 4th	9th or 10th	16 days	When every scab has disappeared.
Typhoid Fever	7 to 21 days, usually 10 to 14	8th or 9th	21st	23 days	In about six weeks. Subject to relapses.
Typhus	5 to 14, very variable	5th	14th	14 days	After 4 weeks.
Whooping Cough	7 to 14 days	The whooping may not appear for 3 weeks, although infectious before then.	.....	21 days	In 5 weeks from the commencement, provided all spasmodic cough and whooping have ceased for at least 2 weeks.

diet, avoiding meat and coffee. Fruit, gruel, lemonade are useful and grateful to the patient.

Chamomilla is the principal remedy, to be followed in two days by *Mercurius*. Give a dose every two hours.

LEUCORRHOEA (Infantile Whites).

Little girls, particularly those of a scrofulous constitution, or who are not kept scrupulously clean, are liable to a discharge from the vagina. Most frequently it is caused by pin-worms.

The treatment consists in keeping the parts clean so far as washing externally can do it, but do not attempt to give any injection or other local treatment without a physician's advice.

Bathe the parts with a lotion of *Hydrastis tincture* and give *Calcarea* internally.

MATERNAL MARKS.

These spots which appear on the skin are the result of a failure in the organic tissues of the skin, and usually of an excessive development of the minute capillaries. A course of remedies, especially *Radium, Calcarea* and *Lycopodium,* often is most beneficial. Give two doses daily, alternating every week.

MARASMUS.

This is a slow wasting away of the whole body, practically a starvation due to lack of proper food

[illegible] Most frequently met with [illegible] and especially in cities and [illegible] The main thing in the [illegible] and sufficient food. (See chap- [illegible] and Indigestion.)

[illegible] warm with a flannel band, and [illegible] Sponge daily with warm water, [illegible] body with olive oil.

[illegible] the *Calcarea* preparations. [illegible] are the most important.

MEASLES.

An infectious and contagious disease associated with fever and inflammation of the entire skin, [illegible] by a peculiar eruption.

Symptoms. About ten days after exposure, it [illegible] head, with a chill fol- [illegible] heat, drowsiness and languor. There is [illegible] headache, backache and aching in the limbs; [illegible] is high, the throat may be sore, there may [illegible] nausea and vomiting; the urine is dark [illegible] and there is a fatiguing, dry cough. These [illegible] growing gradually worse, on the third [illegible] become accompanied with an inflammation of [illegible] tears streaming forth, which are often [illegible] watery and burning discharge [illegible] nose. The cough becomes hoarse and often [illegible] in the chest, and there is [illegible] a peculiar, wanny

appearance and are sensitive to the light. The eruption usually appears on the fourth day, and first appears on the neck and forehead, then on the cheeks and nose. On the fifth day it appears on the body, arms, and lastly, on the legs. The character of this eruption is that it seems to collect into crescentic, or half-moon, horse-shoe-shaped, patches. Its color is dusky red, and feels rough to the touch. The skin between these patches is usually clear, thereby distinguishing the disease from scarlet fever, where the skin is uniformly red. The eruption usually stays out about two days, and then commences to fade, and it fades as it appeared: first from the neck and lastly from the extremities. The cough, coryza and hoarseness decline about the seventh day, and about the eighth or tenth day a diarrhœa is liable to appear. There is usually loss of appetite and a white furred tongue. When the eruption is well out, the fever disappears gradually. After the inflammation of the skin subsides, there is a peeling off of a bran-like, scaly scurf from the surface of the skin, which is called desquamation. These scales are not infectious, like those of scarlet fever.

Causes. Measles is due to a specific poison, and is communicated by contact, by clothing, etc., or by the air. It is liable to appear in epidemics, and of the contagious diseases is probably the most contagious of all. One attack generally gives immunity from another.

Duration. In uncomplicated cases, about two weeks from the appearance of the first symptom; but the patient cannot be said to be out of danger of complications until the expiration of three weeks.

Dangerous Symptoms. A dry dark tongue and lips; persistent vomiting and diarrhœa setting in after the disease has run its course. When there is loss of consciousness and great weakness. When there is a rapid, feeble pulse and a hurried respiration, and where there is a low muttering delirium. Congestion of the lungs and cold extremities; and when the rash is purplish or black, constituting the malignant, or black, measles, whose usual termination is death.

Complications. The complications of measles are more dangerous than the disease itself. They most often occur through suppression of the rash through chilling of the body. This causes congestion of the lungs and other internal organs, and we have broncho-pneumonia, pneumonia or bronchitis as a result. In scrofulous children, glandular swellings are apt to occur. The eyes may become sore—conjunctivitis; or the ears may inflame and run—otitis. These latter are frequent complications. We may also have nosebleed and diarrhœa, which, if not persistent, are not dangerous.

Treatment—PREVENTIVE. After exposure to the contagion, the diet should be mild, the feet should be kept warm and dry, and all exposure to cold

avoided. A dose of *Pulsatilla* night and morning alone, or in alternation with *Aconite,* may render the disease milder. *Pulsatilla* may be administered when the disease is prevailing as an epidemic.

HYGIENIC. This is the most important in the treatment of measles. Guard against taking cold very carefully. The patient should be kept in bed until the eruption has disappeared, and in the room until the twenty-first day, to avoid complications. The room should be darkened, so that the eyes will not suffer. The room should be warm and well ventilated. The patient's hands and face should be sponged with tepid water very often; it is very grateful to the patient, and adds much to his comfort. The diet should be mild—the usual fever diet, viz: broths, bread and milk, crackers, gruels, wine whey, toast water, etc. For drinks, when thirst is present, cold water; it is a mistake to think that a patient sick with measles should not drink cold water. Slightly acid drinks are grateful. Flaxseed or slippery-elm teas are very good to quiet the distressing cough. Sometimes a glycerine jujube, or malt bonbon, or rock-candy, will prove beneficial. Care must be taken in guarding against a chill when the patient first goes out of doors. A change of air is a very excellent tonic for the measles convalescent. A child will be allowed to return to school at the end of a month, provided that all cough and desquamation have ceased and that there is no discharge from either eyes, ears or nose.

MEDICINES. Every hour or two, according to the severity of the symptoms.

Aconite. This is the best remedy we have for the beginning of measles. It corresponds to the fever and hot dry skin, and heat in the head, redness of the eyes and dread of light, the weakness, cough and coryza. It is especially indicated if the patient is very restless, tossing about in bed.

Gelsemium should be given if the patient is quiet, drowsy, languid, with headache and feverishness.

Pulsatilla is most useful when the catarrhal symptoms predominate. The eruption is tardy and slow in appearing, and the symptoms are worse towards evening. There is derangement of the stomach. The cough is dry at night, and apt to be loose during the daytime; there is also earache. Patient desires to be uncovered. It is of no use when there is any fever.

Belladonna. Sore throat, thirst, difficulty in swallowing. Dry, spasmodic cough, worse at night; headache and inflammation of the eyes, congestion and delirium.

Bryonia. Imperfectly developed eruption; it hastens its appearance. Cough and pain in the chest increased by breathing; oppressed respiration.

Ferrum phos. The most important remedy when *chest symptoms* predominate. Cough, painful res-

piration, fever, if at all severe, call for this remedy. It may be alternated, with advantage frequently, with *Bryonia* or *Pulsatilla*, according to the indications.

Hepar, to finish up the course, especially for the remaining cough.

GERMAN MEASLES.

This is a hybrid between measles and scarlet fever. It is very contagious, but is a mild disease and not followed by complications. The initial symptoms resemble measles. There is moderate fever, sore throat and a rash. The latter may show itself without other disturbance. It is seen first on the face; then spreads over entire body. The duration is about three days.

Treatment. Light diet, an even temperature and a few doses of *Aconite* pellets are all that is required. If severe symptoms show themselves, consult the remedies under Measles.

MOUTH.

Cold-sores often seat themselves around the mouth, and some children and families are predisposed to them. In such cases, a course of *Natrum mur.* taken occasionally will prove effective in lessening or removing the tendency. For the attack itself, the application of *Spirits of Camphor*, or *Tincture of Capsicum* will speedily cure.

Ulcerations of the corners of the mouth and chapped lips are met with; sometimes due to a faulty digestion, and again to a scrofulous taint. I have much faith in the application of *Hydrastis Glycerole,* and internally administering a few doses of *Condurango* 3x. Children often have sores around the mouth and chin which must be treated locally with *Hydrastis Cerate,* and internally with *Cicuta,* especially when they form thick, yellow scabs and burn and itch. There is also much disposition to grind the teeth. A dose three times a day for a few days will generally cure the disorder.

Aphthous sore mouth, or thrush, occurs in nursing-children. Little specks, like curd, form in mouth and on tongue. The food and utensils must be looked into, and perfect cleanliness must be observed. The mouth should be washed with a weak solution of *Borax,* about ten grains to an ounce of water, after every feeding. The old-fashioned borax and honey is a soothing application. Internally, the chief remedy is *Mercurius cor.* 6x, a dose every two hours. If necessary, after a few days, a few doses of *Sulphur* 6x may be given; which course will generally cure the disorder.

MOUTH-BREATHING.

The nose is the proper entrance for the air breathed. Air entering thus passes above the hard and soft palate to the back of the throat, where a

tube (called the Eustachian) leads air into the portion of the ear which is concerned in hearing. If there is any obstruction to this free entrance of air, the child becomes deaf, or dull of hearing. Such conditions obtain in catarrh, during and after the grippe, enlarged tonsils and adenoid growths. The nose is the proper entrance and exit for the air breathed, and the child should be able to breathe easily with the mouth closed. If he cannot, and keeps the lips parted, there is something wrong with the nose or throat, and a physician should be consulted. Homœopathic constitutional remedies will go far to correct these defects, even reduce enlarged tonsils and adenoids (which see); but in severe cases, operative measures may be required.

MUMPS.

Is accompanied by fever, but not by inflammation; the salivary glands in the front of the ear undergo a soft and painful swelling of the lower portion below the angle of the jaw, causing must disfigurement of the face. In the course of scarlet fever a similar swelling, but preceded by redness of the skin, results in discharge and requires medical aid, as it tends to become hardened. When it occurs after taking cold, it usually disperses in eight days, if warm applications are employed, and

Mercurius every three hours, one tablet.

Belladonna, if the pain becomes violent.

pain is often referred to the abdomen and the parent fears appendicitis. It is no uncommon thing to confound acute pulmonary disease with appendicitis. A physician should be called, but until his arrival give *Aconite,* a dose every half hour. Later, follow with *Bryonia,* when the patient is afraid of making any movement because every breath gives him a stitch in the side. His breathing is short, labored, anxious; tongue coated, and very thirsty.

Sulphur comes in after the acute symptoms have passed away. It will help to absorb the effusion and prevent relapse.

Locally, a compress of hot water, or cotton batting jacket upon a layer of *Antiphlogistine,* is excellent.

PNEUMONIA.

This is a serious disease, running a regular course, most frequently seen after the third year, and usually attacks healthy children, unlike bronchopneumonia, (which see). It is due to infection by a specific micro-organism. The onset is sudden and rapid; high temperature; rapid breathing; quick pulse; great restlessness; dry, painful cough; pain in chest, sometimes elsewhere. There may be delirium and headache, About the fifth to the ninth day, a change takes place—the crisis—with marked amelioration of all symptoms. Temperature drops, a profuse sweat sets in, and sometimes collapse symptoms show themselves, needing immediate at-

tention. In this disease, careful nursing and skillful medical care are most essential, and these should always be provided. A cotton-batting jacket should be applied in every case. Light and air are of the utmost value in this disease.

The diet during the fever should be liquid—milk broths and water, grape juice and oranges. When the temperature falls, care must be taken to support the patient by more nourishing food—beef-tea, meat juice, eggs and, possibly, stimulants.

Aconite is the first remedy. It is indicated for the sudden attack, high fever, restlessness, anxious breathing, hot skin, etc. A dose should be given every quarter of an hour for six doses; then alternate with *Bryonia,* giving a dose of each every hour. Later, substitute

Phosphorus, when there is much pressure complained of over the heart, difficult breathing, much hacking cough.

Later, *Tartar emetic* and *Sulphur* come into play.

PHIMOSIS.

The contracted foreskin in boy babies is the usual thing and needs no attention unless it is very severe. I do not think circumcision is advisable except in rare cases. Should there be inflammation of the parts or difficulty of urinating or undue constriction, it is well enough to interfere surgically, otherwise not.

The prepuce exists as a protection for the delicate nerve terminals of the glans until the development of manhood no longer requires it. And then it slowly and naturally retracts if not adherent to the glans. I do not think complete retraction of the prepuce needful for the sake of cleanliness in childhood. Nature will care for that if let alone.

In most cases the foreskin adjusts itself to conditions of perfect cleanliness at the time of puberty, if not before. Circumcision is a relic of barbarous and semi-civilized times, before soap and water and sanitation had been preached. It no doubt served a useful purpose among the nomadic tribes of tropical countries. But in these days physicians should cease to preach or impose upon their patients an unnecessary and irrational mutilation.

But there are cases in little boys where the accumulation of smegma underneath the foreskin leads to irritation and possibly to masturbation, which can be remedied by circumcision. A physician should be consulted in all cases where the child screams continually, is restless or where the parts are red, swollen, or otherwise irritated.

PROLAPSUS ANI (Falling of the Bowel).

A protrusion of the mucous lining of the rectum through the anal orifice, after the action of the bowel, which goes back of itself, or is easily replaced.

Causes. Constipation or diarrhœa, purgatives, much straining, or being allowed to sit too long at stool. Homœopathy possesses two remedies that usually prove specific. They are *Ignatia* and *Podophyllum.* Give a dose of a few pellets of *Ignatia* after stool, and in teething-children, or when the protrusion accompanies diarrhœa, give *Podophyllum.*

RHEUMATISM.

Acute inflammatory rheumatism is a severe disease, not only on account of the pain and fever, but especially of the danger of resulting heart disease. The chief symptoms are pain and swelling of joints, sore throat and profuse sour perspiration, which gives no relief to the suffering. The temperature may be very high throughout the attack, which usually lasts from three to six weeks.

The chief points in the treatment are absolute rest in bed, long after the disappearance of all acute symptoms, to avoid overtaxing the heart and thus favoring the production of chronic lesions; flannel night-dress and rest between blankets.

The diet should consist of milk and gruels principally, and, later, broths. The affected parts should be wrapped in cotton-batting.

In this disease the most careful nursing and treatment are required, and the little sufferer should have the benefit of a skilled and gentle nurse besides the best medical attention.

The rheumatic diathesis is expressed frequently in attacks of tonsillitis, chorea, growing pains, recurrent nosebleed, etc.

Among medicines the best are *Aconite, Ferrum phos., Bryonia* and *Rhus.*

Aconite is usually the first remedy when there is high fever, restlessness, hot skin, and parts red, swollen and very painful.

Bryonia. Parts much swollen, the least motion is unbearable; child has headache, constipation and great thirst, and is very irritable.

Ferrum phos. may be given in alternation with *Bryonia* if the fever is high but child is not restless or excited.

Rhus, if the attack has been caused from getting wet and the child seems to be restless because he is worse when keeping the parts perfectly quiet.

A dose of the selected remedy should be given hourly.

Rheumatic children should wear flannel underclothing, drawers as well as undershirts. Great care must be had in keeping the feet warm and dry. Rubbers must be worn in wet weather. See that the feet are warm on going to bed. Remember the danger to the heart, also tendency to tonsillitis and chorea.

RICKETS

Is a disease of hand-fed children or otherwise run down, which shows itself in weak, flabby muscles

and an undue softness of the bones, due to a lack of lime-salts. Abdominal distension is very marked.

Rickets is rarely congenital and not hereditary, and is produced most commonly by improper food and unhygienic conditions; especially deficiency of fresh air and sunlight and also deficiency in fat in the food. Reduce the strength to a given point and Rickets begins. The first dentition usually manifests it.

The diagnosis of Rickets is usually easy enough. Nocturnal restlessness, profuse sweating about the head and upper part of the chest. Great desire to be cool and kick off the bedclothes, even in cold weather; weak legs, large wrists and weak spine; painful sensitiveness of all parts of the body. General flabbiness and anemia.

Teeth are cut late. Sometimes a year goes by before the first tooth appears.

A rickety child is very susceptible to changes of temperature, and hence presents catarrhal symptoms. Remember these, the muscular debility and nerve disturbances. It is liable to fits—a convulsive tendency, then, is marked in this diathesis. *Both the muscles and nerves are weak and irritable.*

Treatment. Since the *quality* of food is wrong in the production of Rickets, this must be rectified. Usually there is too little fat and too much carbohydrates in the food. *Banish all condensed milk and tinned, starchy food.* The treatment requires minute attention to details. It is improper feed-

ing, bad ventilation and neglect generally that produced it—hence reform the diet, provide pure air and absolute cleanliness. Fine division of the food must be insured. Country air, out-of-door life, seashore, offer favorable conditions. Salt water bathing and oil inunctions form part of the treatment to be given. Nourishing food is essential—milk, broths, meat, fruit and Cod-liver oil. Fresh fruit juices, grapes and oranges. The fats that ought to be given are cream, bacon-fat and yolk of egg. *Fresh* whole unsterilized milk and raw meat juice.

Among medicines, *Calcarea phos.* is the principal remedy, to be followed by *Silica.* Massage of the abdomen and the use of an elastic abdominal belt is advisable. It reduces the distension, helps breathing and growth of abdominal muscles.

RINGWORM.

This is a troublesome, parasitic skin disease, appearing in various parts of the body in oval or circular patches, from half an inch to several inches in diameter. It itches and causes much irritation and scratching.

The treatment must be mainly local, but internal remedies assist in the cure, as the disease needs not only the parasitic germ but a suitable soil to develop in. This latter is changed by the internal remedies. Among these *Sepia* is the most important. A dose three times a day for a week. If not greatly benefited, substitute *Tellurium* in the same

dose. Locally, absolute cleanliness by washing with tar soap, and then apply Carbolated vaseline. The disease is very catching, and no healthy child should be permitted to sleep with one affected with Ringworm or use the same comb or brush.

SCARLET FEVER.

An acute, infectious and contagious disease, characterized by a diffused scarlet eruption, which terminates in desquamation, and is accompanied by high fever and sore throat.

Symptoms. About three to ten days after exposure, according to the receptive condition of the child's system, the patient is usually subjected to a chill, and sometimes vomiting (in infants, convulsions), followed by high *fever,* with great heat and rapid pulse. The tongue is coated and *sore throat* is complained of. Usually the onset is sudden with fevers and sore throat. Then there comes an eruption; it may appear on the first day if the fever runs very high, but mostly on the second day. It consists of a bright scarlet rash appearing on the neck and chest, spreading over the entire body within a few hours. The throat now increases in soreness, making swallowing difficult and there may be ulcers on the tonsils. The tongue is heavily coated and covered with little spots of bright red which show through the white coating, giving the appearance of a strawberry, hence giving rise to the term "strawberry tongue."

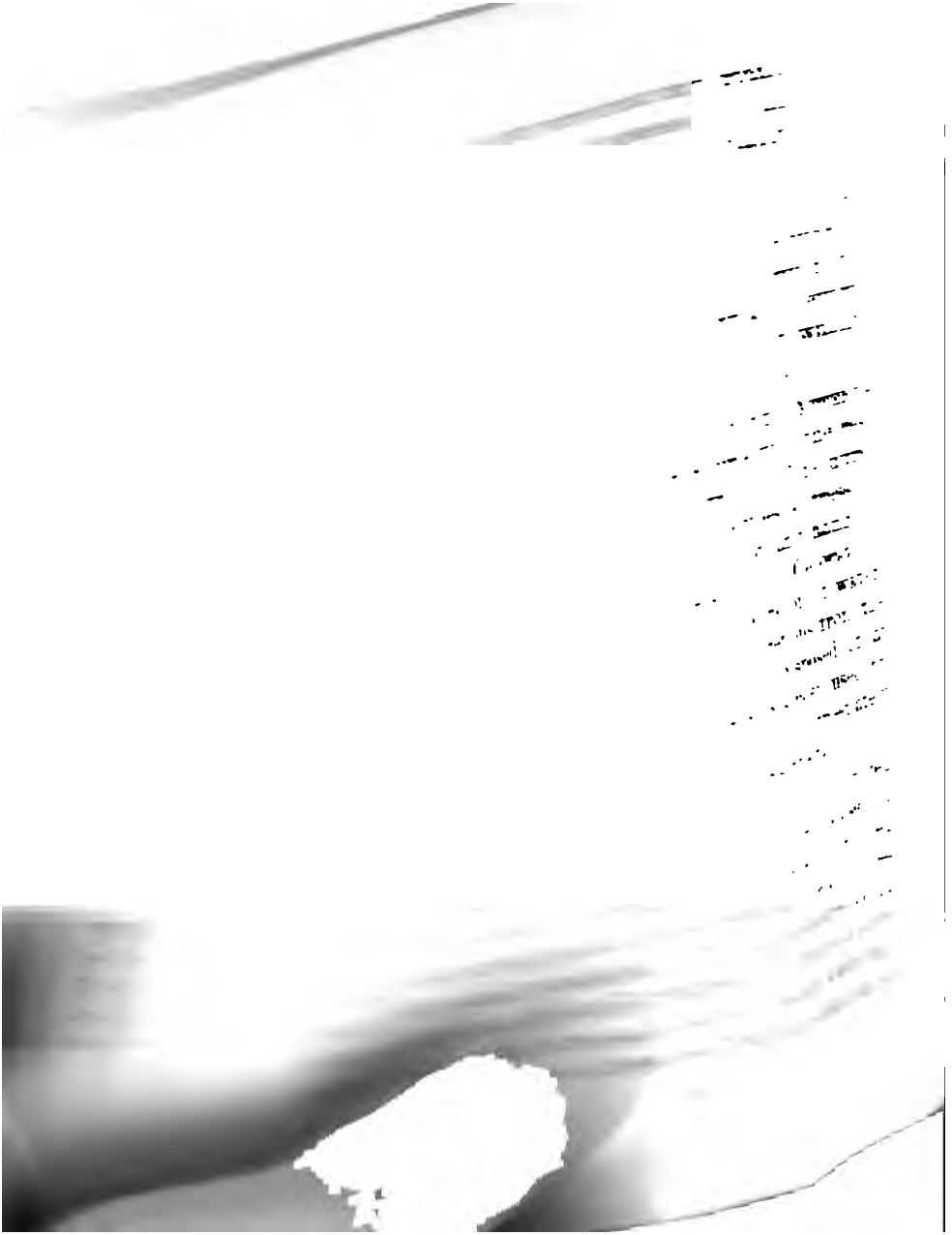
The fever from the first is very high, and as the eruption spreads it rises to a great height, the temperature being 106° at times; the skin is intensely hot to the examining hand; the pulse, even in mild cases, is above 100 and often runs to 125 and higher. There is also headache, great restlessness and delirium. Diarrhœa also is quite common.

These symptoms continue, with more or less severity, for the first four or five days, when the skin pales and gradually peels off in small scales generally, but sometimes in large pieces. At this period the kidneys are apt to become affected.

In the malignant form, fortunately not frequent, the eruption is dark and does not come out well. There is high fever, delirium, great debility, glands swollen and ulcerated, sore throat, with profuse nasal discharge. The prostration may be so great that the patient may sink in a few hours.

The prognosis depends upon the character of the attack and the epidemic. Simple cases recover nicely and without any sequelæ under careful homœopathic treatment. Malignant cases are always grave and require the most assiduous care on the part of physician and nurse. Especially must the patient be carefully kept from colds during the desquamative period. The mortality of this disease under allopathic treatment is very great, ranging from 15 to 25 per cent. It is much less under homœopathic treatment, and devoid of after effects.

Treatment. The patient must be kept in quarantine for six weeks.



a sheet and blanket should form the covering for the patient, who ought to lie on a hair mattress. The room should be freed from unnecessary curtains, hangings and furniture. Adjust the light in the room so as to be most grateful to the patient.

Sponging of the surface of the body with tepid water moderates the great heat and allays restlessness, quiets delirium and favors sleep. A wet compress around the throat always relieves. Sponging with diluted acetic acid (vinegar), one to six of warm water, three times a day, is very useful, modifying the desquamation. The wet pack has a well-earned reputation, but requires skill and experience, but is needed less under homœopathic treatment. In case of tardy eruption or suppression, a hot bath should be given. During convalescence great care must be taken against taking cold. Change of air will greatly help to restore full recovery. During desquamation the restlessness, nervousness and sleeplessness are at times very trying. Sometimes a general anointing of the body with olive oil is most soothing for these conditions. It is useful, too, to prevent the spread of the contagion.

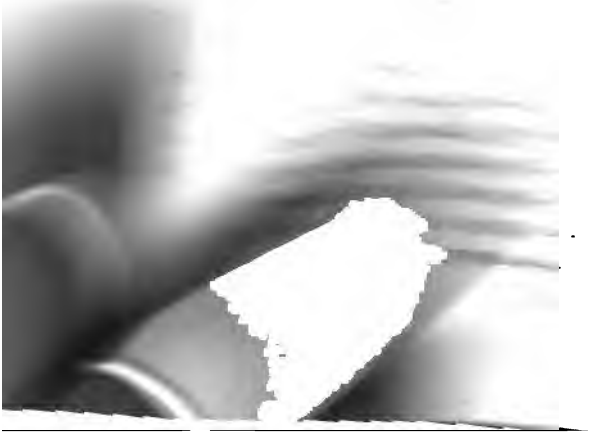
Diet. Milk alone or with ærated water, thin gruel, arrowroot, oranges, grapes, and cooked fruits are grateful and permissible.

MEDICINES. *Aconite* is the remedy at the commencement of the illness or before its true nature is recognized. It is called for by the fever, hot, dry skin, thirst, restlessness and headache.

.sily, and are troubled with unhealthy
[illegible] ules and abscesses form, and do not heal
[illegible]

[illegible] nt. Much is accomplished by diet,
[illegible] air, hygiene, and especially by a course of
[illegible] hic treatment. Since the aim is to change
[illegible] tution by medicines adapted to the defects,
[illegible] time and patience, but the good results will
[illegible] show themselves. The scrofulous child
[illegible] to develop chronic lesions from the slightest
Dampness, coldness and *impurity of atmos-*
must be avoided. Cold and wet (not dry
is a sure depressor of vitality. Strict atten-
to habits. Early to bed and *late* to rise, thus
sleep. Out-door life. Prevent cold and damp
; hence see that rubbers are worn when neces-
. Under-clothing must be high-necked and long-
ved. Pure air, sea air, mountain air; avoiding
lden changes. Salt water baths; inunctions com-
ned with massage; gymnastics. Constipation must
avoided; abdomen massaged. Food must be
urishing and digestible; lamb, beef, eggs, cream,
milk; carbo-hydrates sparingly. Sweets, jams,
andy, pastry are apt to prolong digestion and de-
velop catarrh. Cod-liver oil should be given after
midday meal, as a rule.

Calcarea is one of the principal remedies; especi-
ally for children whose feet are always cold and
damp; who sweat easily; are inclined to acid stom-
ach; glands swell readily, and great sensitiveness



the joints are free. These symptoms are often mistaken for rheumatism.

Treatment. Orange juice, grape juice, cold water, and meat juice, ripe bananas may be given when first passed through a fine-meshed sieve; must be given in addition to the milk; as fruit or vegetable elements act as a prophylactic of scurvy. After the prepared foods have been given until a child is four months old, a spoonful of grape-juice added to the bottle once a day, bovinine—or, better, freshly prepared meat juice—will counteract this tendency, never forgetting to give cold water to drink. I have used a spoonful of baked potatoes, sieved, in the bottle of milk once a day, for thin, scrawny children, and found prompt relief. In winter, when fruits are not always available, the following has been of great service: one potato, an onion, a turnip, all pared, put in two quarts of water, boiled until the potato falls apart; strain, salt, and add an ounce to the bottle each feeding; also beef tea, in which potatoes and carrots have been boiled and strained off.

All prepared foods must be stopped.

Arnica and *Phosphorus* may be given in addition to strict dietetic measures, a dose every two hours, alternately.

Calcarea phos., if the above prove not sufficient.

feather pillow and substitute a cool hair pillow. Sponging with vinegar and water is helpful.

Among remedies *Calcarea* is of most service. Give one tablet three times a day.

THROAT AFFECTIONS.

Ordinary sore throat usually results from a cold, exposure to wind, and also from disordered stomach. The child complains of pain on swallowing; sensation of splinter in throat; great dryness and constriction.

The best treatment consists in a compress of cold water applied to the throat, and the administration, first, of

Belladonna, a dose every hour. It is indicated by the dryness, pain on swallowing, especially liquids, and red appearance of the throat; tonsils and glands apt to be swollen.

Mercurius, when the tongue is coated and broad, showing the imprint of the teeth, and when ulcers are formed on tonsils. The best preparation for ulcerated sore throat is *Mercur. protoiod* 3x, a tablet every hour.

Kali mur., when due to stomach derangements.

TONSILLITIS.

Quite a frequent affection of childhood and early fe, associated with insanitary and septic condi-ons, exposure to cold and wet and malaria, sewer

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imperfect chest development and general stunting of growth. For milder cases a local application of *Glycerole of Tannin* and the persistent internal administration of *Calcarea phos.* and *Baryta jod.* for several weeks, one in the morning and the other at night, will prove efficacious. But if the symptoms are at all obstinate, so far as deafness and stunted growth is concerned, the proper thing to do is to have them removed by the surgeon.

TUBERCULOSIS.

Nothing can be attempted in the way of treatment domestically for this disease, which may present itself as a local or general disease. It is most probably due to an infection from the bacillus of Koch, but needs a favorable ground for its development. This ground is supplied by the scrofulous and tuberculous diathesis. (See Scrofula.) The tuberculous diathesis is recognized by the spare frame; little adipose tissue; the bright, intelligent eye; the delicate, transparent skin; the sharp and quick perception; the highly sensitive and intensely affectionate disposition. The subject is anæmic, pale, thin, teething slow and prolonged. Has frequent attacks of indigestion, colic and diarrhœa; is tired easily, unable to enjoy the sports of playmates; is slow in growth, stoop-shouldered, catches cold easily; very sensitive to atmospheric changes; hacking cough of croupy ring. Perspires easily, especially on head. Glands enlarged, skin is clammy,

TYPHOID FEVER.

This is another infectious continued fever due to a germ brought into the system through contaminated water or milk. Certain parts of the intestines, so-called Peyer's patches, are the special seat of the inflammation. There may be an eruption of rose-colored spots on the abdomen, there always is a typical fever, great prostration and nervous disturbances, diarrhœa and wasting. It is practically unknown in children under two years, most frequently between six and twelve years. The onset of the disease is gradual; headache, disturbed sleep, loss of appetite, constipation and fever being the usual symptoms, that, instead of yielding to treatment, increase and persist. The face assumes a weary, languid expression, tongue becomes dry and red, nosebleed and bronchial symptoms, cracking and bleeding of the lips. Delirium often is present. Enlarged abdomen, with tenderness and gurgling feeling on pressure. The discharges are light ochre color, copious and liquid as a rule. The disease lasts from three to six weeks. The great danger is from perforation of the bowels, due to the ulceration and hæmorrhage, severe diarrhœa and lung complications are dangerous.

Treatment. It is in this disease where modern scientific nursing accomplishes its greatest results. Given this, medical treatment has its greatest possible aid. The room in which the patient is should

[illegible] and easily ventilated. All the discharges [illegible] disinfected. A solution of *Chloride* [illegible] *Chlorates* is to be used. All [illegible] and sheets used for the patient [illegible] and disinfected. The recumbent [illegible] must be maintained throughout the sick- [illegible] during early convalescence. The diet [illegible] liquid; barley milk and barley water, [illegible] vegetable soup, mutton broth, given regu- [illegible] every two hours. *Plenty of water.* Beware of [illegible] and of returning to solid food too early. [illegible] must be sponged daily with tepid water [illegible]

[illegible] of a remedy must ever be a very [illegible] and when properly chosen will [illegible] in restoring health.

[illegible] *Bryonia* and *Arsenic* are the great [illegible] medicines. There are many others especi- [illegible] to varying conditions, but only the [illegible] can rightly select them. The medicine [illegible] given hourly until improvement shows

WARTS.

[illegible] use of caustics is to be condemned. [illegible] these growths should have them [illegible] gently with some antiseptic soap and [illegible] over a few moments in a weak bichloride [illegible] paint with *Thuja Collodion*, or

WETTING THE BED.

This is a frequent and troublesome affection of children, dependent upon causes often difficult to find out; it may consist of partial or complete loss of power to hold the urine. In rare cases, the child has an almost incessant urging to pass water, which, if not responded to, results in a painless, involuntary discharge.

Causes. Worms; scrofulous constitution; too large a quantity of warm fluids in the evening; food or drink causing an acid state of the urine, etc. It is usually found in children of a highly nervous temperament, but not invariably so.

Treatment. This is a very obstinate affection and remedies frequently prove of little avail. Much depends upon the faithful training by the nurse. Sometimes by elevating the foot of the bed so that the bed forms an angle of 45 degrees with the floor, the complaint is stopped in such children, where the urethral shpincter is especially weak. In this position, the bladder is capable of holding a certain amount of urine before it reaches the level of the urethral opening. Among remedies the principal are: *Belladonna, Sulphur* and *Causticum.* Begin the treatment by giving *Sulphur,* a dose night and morning for one week. Then follow with *Belladonna,* a dose every two hours for one week, changing to *Causticum,* should no decided improvement show itself.

Cina is indicated if the trouble is due to worms.

Pulsatilla, especially for little girls and tender, delicate children, who cry readily and are chilly, and if fat food disagrees. Do not punish the child, for he is not responsible. The child should be taken up to urinate one or two hours after going to bed. Cold hip baths in the morning are beneficial in these cases.

WHOOPING COUGH.

This is another contagious disease of childhood, beginning like an ordinary catarrh. It is a paroxysmal, spasmodic cough, consisting of violent, rapidly interrupted fits of coughing, alternating with prolonged, shrill, crowing respirations and ending in vomiting or in the expectoration of thick, glairy mucus. It occurs mostly in young children, and the younger the child the greater the danger.

Symptoms. After an incubation of six days the attack commences with a severe cold, cough, and fever. The peculiar whoop is heard in about ten days.

Whooping cough usually commences as a catarrh, with cough, which returns in fits. In about a week the cough recurs at shorter intervals, with extreme severity, the child turning red or almost black in the face, and appears as if choking, during which the lungs are emptied of air to the last degree; and then a long, sonorous inspiration, taken to refill them, constitutes the "whoop."

This "whoop" is the signal of the child's safety, for when suffocation does take place it is before the crowing inspiration has been made.

The fit passes off with the expectoration of glairy, ropy mucus, and sometimes with vomiting. Between the attacks the child is lively and appears well. The cough is generally worse at night, so that a decline of nocturnal attacks is a favorable symptom. But it may be brought back with all its severity by exposure, improper food, or by want of careful nursing. It is often fatal, especially in winter, when complicated with congestion of the lungs, bronchitis, pneumonia, etc. This is especially the case in little patients with tendency to tuberculous trouble or in those otherwise below par. The patient may seem perfectly well between paroxysms. The disease lasts from one to three months, but can frequently be cut short by homœopathic treatment and greatly modified by change of air.

Treatment. The little patient should have the benefit of fresh air, and hence he ought to be out of doors most of the time in pleasant weather. The sea shore is especially beneficial. Infection to others is not to be feared, unless they come in close proximity, which can be prevented. For the very troublesome night attacks, vaporizing Cresoline in sick room is of real benefit. The great objection to it is the persistent odor, which becomes objectionable to the well members of the household. Sometimes inhalation of steam is equally effective.

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must be disinfected. A s
of lime or Platt's *Chlor*
napkins, towels and s
should be boiled and d
pasture must be maintained
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must be liquid; [illegible]
strained vegetable s
every two hours.
overfeeding and of
must

Sulphur. When the phlegm loses its tenacious character and becomes opaque, showing decline of the disorder.

It is best to select one remedy for the patient and use it persistently. Nothing is gained by too frequent change of medicines.

VACCINATION.

So long as there is a law requiring all children to be vaccinated before entering public schools, there is nothing to be done but obey the same. Remember that the vaccination wound must be treated in a surgical manner, aseptically, otherwise the wound may become infected and mischief result. See that the vaccination is properly protected from contact with the atmosphere, or with soiled clothing. A protecting pad should always be applied and every precaution taken that the scab be not knocked off by violent handling. Frequently children scratch the wound and thus infect it. Always have your own physician vaccinate your child.

Much is to be said in favor of internal vaccination, and in some States—Iowa, for instance—it is accepted by the health authorities as equally protective. It consists in the internal administration of the smallpox poison, *Variolinum 30*—a dose night and morning for several days. The results so far justify its further employment experimentally.

WORMS.

Children are often afflicted with worms, not, indeed, as frequently as used to be thought by our grandmothers; still in these days of artificial feeding, prepared foods of all kinds, quite frequently. Both round, so-called stomach worms and pin worms are met with and give rise to many reflex symptoms. The round worms are found in the small intestines and may sometimes work upward into the stomach or downward into the large bowel and thus passed with the stool. They may be from four to twelve inches long.

The thread or pin worms are very slender and small and are found in the lower part of the large bowel near the rectal orifice, causing intolerable itching within and around the anus. They may invade the vagina in little girls, causing leucorrhœa.

The general symptoms due to worms are chiefly itching of the nose, grinding of teeth, variable, often voracious appetite, restless sleep, sallow pale complexion with blue rings under the eyes, fetid breath and often a tickling cough, especially at night. If the worms are found passing in the stools the treatment is obvious. If none have been found, it is best to give *Santonin* 3x tablets, one before meals and on retiring, for three days, then follow with a spoonful of *Castor oil,* which expels the worms. If none are passed, it is likely that the symptoms are due to other causes.

The treatment is simple so far as medicines are concerned. Give *Santonin* as above indicated. For very young children it is best to give

Cina, especially when they are cross and irritable, grate the teeth in sleep, have colic and inclination to vomit.

Mercurius and Sulphur, one at night and the other in the morning may be given, if the above but partially relieve.

If pin worms are actually present give besides an injection of lime water and apply sweet oil or vaseline to the rectum. This must be repeated every night for at least a week. Do not be dosing children constantly for worms unless you are positive that they exist. The disturbances may be due to wholly different causes, and a physician should be consulted in all doubtful cases.

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NAME	DATE DUE